

- BASKETBALL ENGLAND

RETURN TO PLAY

GUIDANCE DOCUMENT

LAST UPDATED MARCH 2ND 2021

This document is correct at the time of publication. Please read this document in conjunction with the Government guidelines. Updates will be produced to coincide with significant national guidance changes.



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01.
INTRODUCTION

Basketball is a contact sport with over 31,000 registered members and whilst we at Basketball England would love to get all players back on court as soon as possible, our main priority is the health and safety of everyone within the game. In response to this unprecedented period the sport finds itself in, Basketball England has designed this Return To Play - Roadmap (RTP) to help all within the game negotiate returning to basketball in the safest way possible.

This document aims to help basketball players, coaches, support staff and administrators to live safely during this crisis; and when restrictions are reduced, to guide a safe return to activity in a compliant and safe manner. This guidance document has been created based on the current research available and following discussions with Sport and Exercise Medicine staff, and their counterparts outside of basketball. Advice from UK Government and FIBA has helped to shape these guidelines.

Please note this document reflects the information and research gathered when it is circulated. The COVID-19 pandemic, and the responses of the public health community and UK Government remains fluid; data and recommendations will change, so this document will be updated to reflect this process. Please check the date of last update on page 1 to ensure you are viewing the most current document.

Guidelines for the following will be found in this document:

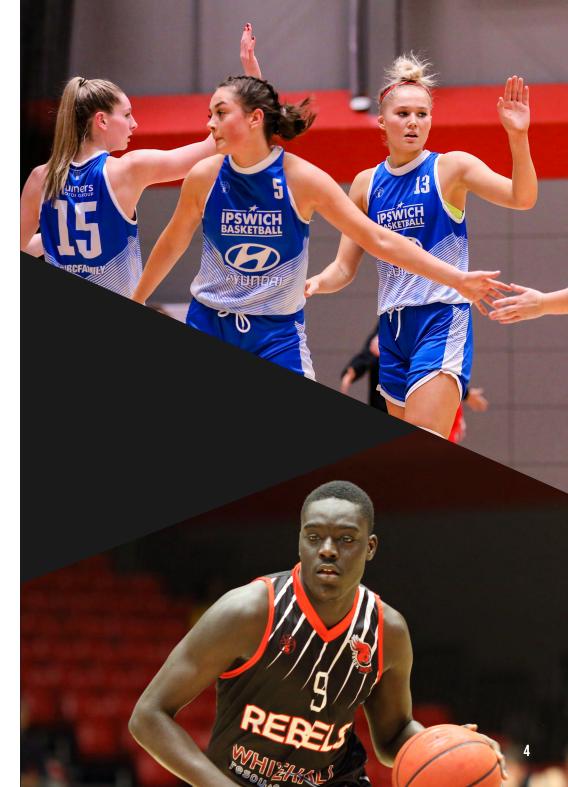
- Outline of RTP Roadmap Guidance
- COVID-19
 - What is it
 - Signs and Symptoms
 - Self-isolation
 - BAME risks
- Risks within Basketball
- Screening
- Hygiene considerations
- Social distancing
- Return to sport after COVID-19
- Further resources
- Comprehensive Appendices

We would stress the outline of the RTP may be fluid and Basketball England will always adhere to the UK Government and Public Health England's advice. Please monitor the Basketball England website and social media outlets for further advice or information changes.

Every club is required to have a nominated COVID-19 Officer, who will be able to monitor and administer all communications regarding the RTP guidance. Please see **Appendix 1**, which outlines the key role and tasks of the nominated Club COVID-19 Officer.

Before moving onto Level 2 we are also asking all clubs to fill out a **declaration form** to indicate that they understand the RTP and are looking to implement it amongst their members.

WE ARE ASKING ALL CLUBS AND ALL INDIVIDUALS ASSOCIATED WITH BASKETBALL TO TAKE RESPONSIBILITY FOR REDUCING THE RISK OF COVID-19



02. RETURN TO PLAY - ROADMAP

BASKET BALL ENGLAND

RETURN TO PLAY ROADMAP

BASKETBALL ENGLAND RESPONSE LEVEL	WHAT?	WHERE?	HOW?	WHEN?
LEVEL 5	 No public gatherings 2m social distancing No travel allowed 	• Home or garden	 No group training No competitions 	• N/A
LEVEL 4	 Public gatherings up to 2 2m social distancing Limited travelling 	• Outdoors	 Alone or with one other In a household group Training within education provision No competitions 	From March 8th 2021 for everyone
LEVEL 3	NO LONGER /	APPLICABLE UNDER	LATEST GOVERNMENT	GUIDANCE
LEVEL 2	 Public gatherings increased 1m+ social distancing Limited carpooling 	Outdoor & indoor courts	 Drills, skills & team based training/competitions - Max. 30 per court No spectators 	 Outdoor: From March 29th for everyone Indoor: From April 12th for U18's only
LEVEL 1	 Public gatherings increased Social distancing removed Limited carpooling 	Outdoor & indoor courts	 Drills, skills & team based training/competitions - Max. 30 per court Limited spectators 	• From May 17th 2021 for everyone
	All restrictions removed	Outdoor & indoor courts	Full training & competition framework reinstated	• From June 21st 2021 for everyone

This roadmap is subject to and will change based on government advice and guidance. Please refer to the 'Return To Play Guidance Document' for more detailed advice.

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O3. C0VID-19

Coronavirus Disease 2019 (COVID-19) is an ongoing worldwide pandemic caused by the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-COV-2). This virus appears to be highly infectious and at present, we do not have an effective treatment for it. Most people (80%) who are infected have mild symptoms and some do not have any symptoms at all. Because this is a new virus, there is much we do not know about it. However, like other viral infections, we know that many individuals who are infected, are infectious for up to two days (48hours) before they have symptoms. This means it is easy to spread this disease before you are aware you have it.

While the majority of those who become symptomatic can be managed at home, 15-20% who contract the virus become unwell and may require hospitalisation. A small number (5%) require intensive care, some of whom require breathing support through ventilation. These patients are more likely to be male, older (over 60) and have underlying conditions such as cardiovascular disease, raised blood pressure, chronic lung disease or diabetes. There is growing evidence individuals from Black, Asian & Minority Ethnic (BAME) communities appear to have higher rates of serious illness from COVID-19 (up to 1.9 times more likely to die from COVID-19 compared to white people). Given that a large proportion of the basketball family (58%) come from these communities, the guidance should be seen as especially important for these individuals.

The exact mortality rate associated with COVID-19 infection is unknown, but it may be as high as 1- 2% overall and is higher in vulnerable groups. COVID-19 will likely remain a potentially deadly virus until an effective vaccine is created, but vaccination is unlikely to be available for several months to years.

Younger healthy people appear to be less likely to develop severe symptoms based on current knowledge. However, anyone can spread the disease, infecting those they love, their friends, colleagues, and teammates.

Governments and health authorities around the world have instigated social distancing requirements, restrictions on public gatherings, quarantine measures and limited travel to and from other countries to slow the spread of the disease and to enable health care systems to cope with the potential increased demands associated with managing the disease. The basketball community has a responsibility to support these efforts.

SIGNS & SYMPTOMS

In UK, the National Health Service (NHS) describes common symptoms of COVID-19 to include:

- High temperature over 37.8°C
- New and persistent cough
- Loss of taste or sense of smell

In addition, other symptoms can include:

- Fatigue
- Hoarseness
- Runny nose
- Sneezing
- Shortness of breath
- Sore throat
- Wheezing
- Tiredness

Though these are common symptoms of other illnesses, there may be signs an individual has been infected by COVID-19, and it is vital that you do not infect teammates, colleagues, your friends and family or the general public.

WHAT CAN YOU DO TO STAY SAFE?

- Please see our hygiene guidelines
- Wash your hands regularly and thoroughly clean your hands with soap (for a minimum of 20 seconds) or an alcohol-based (minimum 60% alcohol or 70% isopropanol) hand rub. Washing your hands with soap and water or using alcohol-based hand rub kills viruses that may be on your hands.
- Maintain social distancing rules maintain at least 2m distance and where not possible, at 1m plus between yourself and others. When someone coughs or sneezes, they spray small liquid droplets from their nose or mouth, which may contain the virus. If you are too close, you can breathe in the droplets, including the COVID-19 virus, if the person coughing has the disease.
- Avoid touching hands to the face, mouth or nose hands touch many surfaces, and surface to hand transfer can spread the virus. Once contaminated, hands can transfer the virus to your eyes, nose or mouth. From there, the virus can enter your body and can make you sick.
- **Catch it, bin it, kill it** make sure you, and the people around you, follow good respiratory hygiene. This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze.
- New Government guidance is advocating 'Hands, Face, Space'; wash hands, cover your face and maintain space between individuals.

WHAT HAPPENS IF I HAVE BEEN IN CONTACT WITH AN INFECTED PERSON?

As defined by the NHS close contact is:

- Having face-to-face contact with someone less than 1 metre away (this will include times where you have worn a face covering or a face mask)
- Spending more than 15 minutes within 2 metres of someone
- Travelling in a car or other small vehicle with someone (even on a short journey) or close to them on a plane
- The NHS currently recommends that close contact with an infected person **requires that individual** to be isolated for 10 days from the last time they were exposed to the infected person. You may have been informed of this via NHS Test and Trace system.
- If you are worried that this may relate to you, you should follow the NHS Isolation Guidelines.
- Further guidance is contained within Appendix 4 – RTP Risk Information.



IS THERE A HIGHER RISK OF INFECTION AMONGST BLACK, ASIAN AND MINORITY ETHNIC COMMUNITIES?

We believe there is a higher risk of infection amongst these communities. Please refer to the **'Risks within Basketball'** for further guidance.

SAFEGUARDING

The pandemic continues to have a big impact on children and young people, and those who support them. The Safeguarding Policy, updated in June 2020 contains a specific section on Covid-19. Please view it **here**.

There are a few simple steps clubs can take to support children at this time:

- 1. Please continue to follow the process outlined in our Safeguarding Policy for reporting concerns.
- 2. Remind all staff and volunteers how to respond if a child or adult at risk talks about a concern. Please go to this **link** from the NSPCC which includes information, advice and posters which can be shared with staff and volunteers.
- 3. Continue to share contact details of key support services through your social media and other channels:
 - · Childline

Tel: 0844 892 0220 (9am-Midnight) Web: www.childline.org.uk

· NSPCC

Tel: 0808 800 5000 (9-6 Mon-Fri) Email: help@nspcc.org.uk Web: https://learning.nspcc.org.uk/

Child Exploitation and Online Protection Command
 Web: https://www.ceop.police.uk/safety-centre/

For more information please visit:

https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/ coronavirus-abuse-neglect-vulnerable-children/

O4. RISKS WITHIN BASKETBALL

Within a basketball game, there are high levels of contact for all players and staff. These risks can be reduced during training and games by utilising specific guidance. When we decide to return to competitive basketball, members will have to be aware that the return will be managed to reduce the risk of COVID-19 spreading further than is necessary.

Should a teammate or opposition player in a recent training or match develop COVID-19 symptoms, all of those who have participated in the session will require isolation, as per the **Government guidelines**. You should only get tested if you then present with symptoms. Should you get a test without symptoms and it is negative, there is still a possibility of becoming symptomatic as the virus is known to be dormant for up to 10 days after contact.

Basketball England should also highlight that only 5% of clubs in England own or lease their own premises. Of the other clubs, 70% rely on educational institutions as venues. We expect there to be significant disruption to the availability of those educational institutions as each facility will have their own re-opening procedures, which will need to be considered in addition to this plan.

RETURN TO BASKETBALL LEVEL SYSTEM

The Basketball England Return to Play (RTP) levels described in the **Outline RTP-Roadmap** document, link with the UK Government's guidelines set out to govern the return to social and physical contact - Level 5 (highest risk of infection) down to Level 0 (normal playing, social and physical contact) allow the sport to mitigate the risk of COVID-19 infection throughout the different stages of RTP.

However, individuals must remember that there can never be risk-free basketball and any basketball activity will come with inherent COVID-19 risks until there is a proven vaccine or treatment and a significant reduction of the disease in the population. It must also be stated that in the same way the Government risk levels are subject to change at any time, so will the levels of the Basketball England RTP. The levels may also change per region should there be a local or regional lockdown imposed by the government. More information **here**.

PERSONAL RISK

- Players should be aware of all signs and symptoms of COVID-19 and should aim to reduce risk of infection as much as possible (see COVID-19 Symptoms and Hygiene Advice).
- · Increased numbers at training will increase risk of exposure to the virus
- Playing sport indoors has a higher risk than playing outdoors



- Individuals (or members of their household) suffering from other underlying illnesses may have a higher risk than others, if exposed to COVID-19. Underlying medical issues may include:
 - Cardiovascular problems
 - High blood pressure
 - Diabetes
 - · Chronic kidney or liver disease
 - Compromised immunity diseases
 - Obesity (BMI 40+)

These individuals have an unquantifiable risk with current research predicting possible risk. Therefore, ALL individuals within the club need to have read Appendix 4 of this document prior to recommencing basketball to understand the associated risks of participating. A club's COVID-19 Officer or secretary should pass on **Appendix 4** to all members. Following this, members should all be aware of the risks of playing basketball with others and that they consent they are happy to play despite the increased risk to their health.

• If **Returning to Sport from COVID-19**, please see separate guidance.

PERSONAL PROTECTIVE EQUIPMENT

Facial Coverings – coaches, support staff, table officials and statisticians are mandated to wear facial coverings to reduce infection risk. Players are not required to wear facial coverings whilst playing. It is acknowledged that referees maybe able to wear a lightweight plastic visors at their own discretion. All players should wear face coverings at all times before and after training or games.

We have seen a number of providers market the use of face coverings for athletes. Normal surgical type mask may prohibit full lung function therefore we are advising against these, however for referees and players, the athlete centred face masks (such as those advertised by Under Armour for instance) maybe better as gathering numbers may increase.

If you have had a vaccination there is still a risk at you will contract the virus and will be able to pass it on to other people. The risk of serious illness is lowered with the vaccine but contracting the virus is still a risk. While the evidence is limited, facial coverings may reduce the risk of infection (see **resources**) by:

- Reducing the water droplet effect from coughing, sneezing and generally breathing.
- Reminding the wearer to not touch their eyes, nose and mouth.

We would recommend the following as good facial coverings:

- Surgical masks
- Three layered masks
- Athlete-centred face masks

FFP3 masks should be reserved for clinical use by the NHS and stocks preserved for this important work. As individuals will be screened, we do not perceive there to be a need for FFP3 masks, although this relies on all clubs to screen properly. First Aiders should use their clinical judgement.

Due to current changes in UK Government regulations on 31 July 2020 we are making face coverings by all those not playing basketball (coaches, staff etc) mandatory when training or games indoors and we are strongly advising them to be worn when training outdoors.

BAME COMMUNITIES

58% of our membership are from Black, Asian, and Minority Ethnic (BAME) communities. There appears to be evidence these communities are affected more by COVID-19 than other sections of society. The **Office of National Statistics** describe black people as being 1.9 times more likely to die from COVID-19 than white people, with Pakistanis and Bangladeshis at 1.8 times, and Indians at 1.5 times. There appears to be a number of possible reasons for this, but none that have been researched in enough depth by the scientific world to be acted upon specifically.

Basketball England would advise that individuals from BAME communities should only return to playing basketball if they understand the possible increased risks associated with coming into a basketball environment. Basketball England has created an **information sheet** for all members to read, which highlights the risks of returning to basketball for everyone including the wider household members **Appendix 4**.

TEAM RISK

- Large gatherings and high numbers within a confined space are likely to increase the risk of infection
- In Level 2, we are allowing the ability for a full squad training to take place (including coaches and support staff) therefore there is a maximum of 30 people court although we are recommending a staggered approach to increasing numbers.
- Outdoor training is likely to reduce the infection risk due to the reduction in the virus' ability to travel in that environment aerosol spread

NATIONAL RISK

- Increased travel distances increase the likelihood of viral spread, coupled with pressure on transport systems
- At level 2 (when competition resumes), we may re-introduce competition on a local/regional basis first and expand to national if government advice allows
- Use of minibuses and coaches is also not advised for game travel, due to the close confines of individuals within them. If completely necessary, then spacing between seats is advised, hand hygiene before and after getting on board – see Appendix 9 Game Day Guidance
- Increased movement of people can spread the virus and poses challenges in contact-tracing individuals who subsequently are diagnosed with having COVID-19

05. Screening



Due to the close contact nature of basketball, we are advocating screening of **anyone** playing or participating in basketball to ascertain whether individuals are able to take part safely. We are asking both clubs and all individuals associated with basketball to take responsibility for reducing the risk of COVID-19.

INDIVIDUAL SELF-SCREENING

- Before leaving the house to participate in basketball, please check you:
 - Do not have symptoms of a high temperature (feeling hot, feeling cold, shivers, feeling under the weather)
 - Do not have a new persistent cough
 - You have not got a loss of taste or smell
 - You have not been in contact with a person with suspected COVID-19 within the past 48 hours
 - You have not been advised to self-isolate due to a third party from another setting (i.e. school or work) who reports an individual has been infected with COVID-19. This may be relayed to the individual by NHS Test and Trace.
 - No one within your household has COVID-19 symptoms as outlined above, which would require the whole household to go into isolation as guided by UK Government
 - You have not returned from a foreign country in the past 10 days that the UK Government requires people to quarantine on return – a non travel-bridge country as defined by UK Government
 - Individuals must not attend a basketball session if any of the above are true
 - There should be no pressure placed upon a player to attend a training session or game if they have symptoms or they feel like the environment is unsafe for them
 - If during a session an individual feels uncomfortable with the management of the session, then there should be no pressure placed on that individual if they decide to opt-out of that session
 - All individuals should have read the Basketball England COVID-19 Risk Information, Appendix 4

CLUBS

- The priority is to keep your players and staff healthy
- Any individual coming to training/a game needs to be screened before entering the venue and their attendance documented
- Contact details are required in order to help NHS Test and Trace service if a suspected case of COVID-19 arises
- The attendance records of all individuals attending the training or game is to be held with the **Club COVID-19 Officer** in a secure place and records should be maintained in line with the clubs existing policies and procedures
- Screening temporary records are to be securely kept for 21 days after the training session before being confidentially destroyed
- We would remind clubs to be mindful of GDPR regulations. Please follow this link to the Information Commissioner's Office (ICO) regarding holding data during this pandemic
- Clubs are required to provide all staff and players with education on COVID-19 and the potential risks associated with playing basketball

SCREENING

- RTP screening of all players and staff up to Level 0
- Screening sheet in Appendix 3 All basketball related activity requires screening to take place prior to it (basketball, conditioning classes, technical or tactical sessions)
- Ensure screening is conducted in a suitable area away from venue entrances, ensuring good social distancing practices, i.e. far end of car park
- If a line of people forms, they should all maintain 2m distance between them and be wearing facd coverings
- Temperature to be taken on arrival to the venue, outside in the carpark and documented. Temperature to be taken ideally with a handheld infrared thermometer (cost £55 with **Fit4Sport**, we recommend two per club - one as a backup).
- All individuals entering the gym (coaches, players, officials) to complete screening. Note down name, along with their temperature and document answers to all screening questions (Appendix 3). Only essential coaching staff to run the session should be present, no

observers etc.

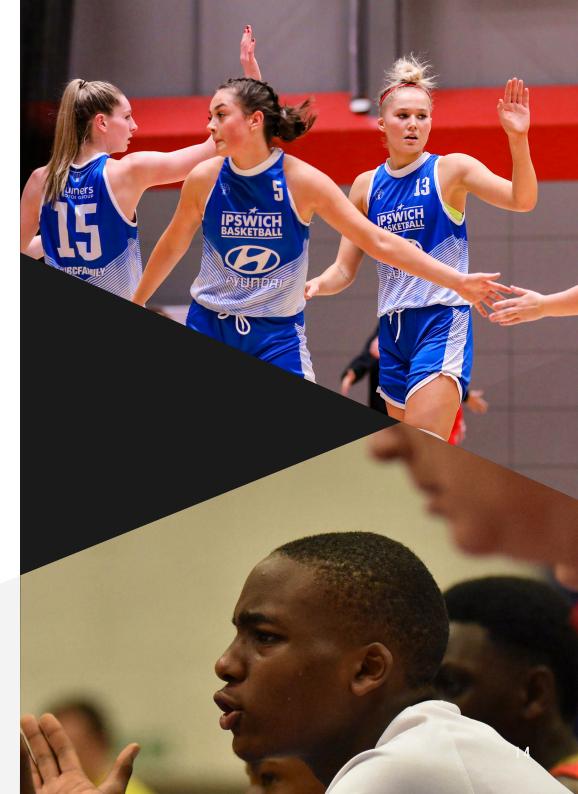
- The use of the ProActive Symptom Checker (as advocated by our insurers Howden's) for all club members may help to speed up this process
- Any positive answers to the questions will mean that the individual cannot attend the session and they should be advised to return home to self-isolate as per the Government's guidelines. Club COVID-19 Officer needs to complete BE COVID-19 Reporting Form.
- Screening documents are to be temporarily kept within the club club for 21 days after the session, under the jurisdiction of the Club COVID-19 Officer in order to trace any individual who at a later date reports COVID-19 symptoms. Clubs must ensure compliance with data protection and GDPR and be guided by the **ICO**.

IF COVID-19 SYMPTOMS REPORTED AFTER THE SESSION

- All participants (players, coaches and support staff) in the training session have a responsibility to notify the Club COVID-19 Officer should they get symptoms of COVID-19 within 48 hours of the training session
- Anyone with symptoms should **ask for a test online** or call to arrange a test by calling 119. They have to complete the test within 5 days of the symptoms starting.
- Club COVID-19 Officer to direct the infected individual to the **National Government's Test and Trace procedures**. In England, this will mean that the individual will have a test within 48 hours. England, Scotland, Wales and Northern Ireland, have different procedures currently.
- In addition to the above advice, the Club COVID Officer must contact all individuals that attended the training session in question to advise that an individual within that group has reported symptoms. If the individual is a coach, then all participants of all sessions will need to be contacted.
- If a 'bubble' system within the training session has been adhered to strictly then only the bubble needs to self-isolate

If worried about what to do if a COVID case is reported, please find this **flow chart** showing who should self-isolate.

- The only exception to a coach having to self-isolate would be that they had remained 2m outside of the training 'bubble'. However, the club and individuals will have to take a risk-averse approach to the whether the coach self-isolates. For instance, if there are a large number of corridors and hand surfaces that an infected individual has touched during the training session, there is a much higher risk of transmission, therefore the club may opt to ask all attending the session to self isolate.
- If a member of the club presents with symptoms within 48 hours of a training session/game and has been in contact with players and officials in the interim, then training/practice/matches played by the club must be suspended and a period of isolation as set out by the Government followed - currently 10 days for an individual and 10 days for members of the household.
- The name of the infected individual is not to be disclosed to protect anonymity
- ONLY GET A TEST IF YOU HAVE SYMPTOMS OF CORONAVIRUS
- All attendees of the session should be advised to isolate for 10 days (as per Government guidelines) incase symptoms arise. If you are tested without symptoms, you should still self-isolate for 10 days as symptoms may still arise after the test.
- COVID-19 Officer should complete the following **COVID-19 INCIDENT REPORTING FORM**.



Positive COVID-19 symptoms such as temperature, cough, loss of smell/taste Recent contact with another individual with known symptoms Temperature (37.8C or higher) taken prior to entering gym

If no symptoms, no contact and no temperature on testing

Enter the gym

If "YES" to any of the above

DO NOT ENTER THE GYM. Self isolate as per government recommendations. If symptoms of temperatures or contact prior to training. Please contact your COVID-19 officer and do not travel to the gym and follow government guidance.

Has this individual had contact with other players/members of the club within the last 48hours? If so all individuals and all club members they have also come into contact with must be notified and removed. This may lead to a temporary suspension of training/competition and other gatherings by the club given the likely numbers that will be affected or involved. We play a sport with bodily contact along with a high moisture level. Sweat, saliva and moisture-rich breath will all be in potential contact all players and staff during a game or training session.

This is increased when playing indoors. This is the current guidance on maintaining good hygiene for all within basketball through RTP levels 4-1.

These guidelines have been prepared to best reduce the amount of virus transmission. Transmission may come in a number of forms:

- Person to person
- Equipment to person
- Surfaces to person

The higher the number of people in one area, the higher the risk of transmission. **Appendix 7** highlights the risk of transmission from 'Contact': 'within 1m of another person'. We believe basketball is a medium-risk sport (compared to other sports) due to our 'Contact' time. However, that risk is only set at that level if the following hygiene guidelines and the screening guidance is adhered to.

PLEASE BE REMINDED THAT FACE COVERINGS ARE MANDATORY FOR ALL COACHING STAFF TRAINING INDOORS AND ARE STRONGLY ADVISED WHILST TRAINING OUTDOORS.

UD. HYGIENE CONSIDERATIONS

PREPARATION

- Arrive to the venue already changed and ready to play
- On arrival hands must ideally be washed with soap and water (As per hygiene guidelines) or hands sanitised.
- After going to the toilet, thoroughly wash hands for a minimum of 20 seconds with soap or alcohol gel (minimum 60% ethanol or 70% isopropanol)
- Minimal use of changing rooms
- No handshakes, high fives or other bodily contact
- · Social distancing rules apply if at level 4 (currently 1m plus)
- · Strongly advise against carpooling to venues
- Avoid public transport where possible
- Avoid touching high-contact surfaces such as door handles, benches, chairs, public computer keyboards etc.

DURING TRAINING/PLAYING

- Ball washing/wiping down with wipes prior to starting (we recommend
 Clinell Universal Wipes) each individual to clean their own ball (Level
 4)
- At Level 4, a single ball could be used **ONLY** within a household as long as it is wiped down before and after playing
- In order to reduce infection risk further we are recommending stopping training and disinfecting the balls every 20 minutes
- No use of bibs unless brought directly by the player
- No shared towels
- No shared water bottles
- All water bottles clearly labelled with the individuals name on it
- No 'crates' of water to be provided by clubs/coaches
- No handshakes, high fives or other bodily contact
- Have plenty of hand sanitiser available courtside with regular stoppages every 20 minutes for application

- Social distancing rules apply if at Level 4
- Avoid shouting at all times due to the increased risk of aerosol transmission
- For Level 4, players should only use their own ball, cleaned before and after training
- Avoid passing the ball to one another, even if retrieving it at Levels 4
- At Level 2, once team practices commence, we recommend wiping balls every 20 minutes
- We advocate the use of the 'bubble' system to keep small numbers of players contacting one another. This should start with a bubble size of up to six and then steadily increase to 12 over the course of six weeks providing all COVID guidance is adhered to. See our Six Week Pre-Season Guidance
- Ball washing/wiping at end of the session everyone to wash their own.
- · Immediate hand washing once the session is complete
- Use of face masks for coaches, support staff and officials is mandatory indoors. A full face visor could also be considered as a form of mitigation but it only protects the individual wearing it, not necessarily the other people around them.

COMPETITIVE GAMES

- Only from levels 2 and 1 once Game Day Risk Assessment (**Appendix 11**) has been completed.
- Level 2 competitive games have specific requirements for the safe management of the game. See Appendix 9 - Game Day Guidance or Local Junior League Guidance for numbers.
- No spectators at Level 2 Eligible game roles outlined in Appendix 9.
- Game Day Logistics Form (**Appendix 10**) to be distributed to opposition and officials by the home team at least seven days before the game
- Hand sanitiser (minimum 60% ethanol or 70% is propanol) is advised:
 - Before and immediately after playing
 - When being substituted on and off the court
 - Time-outs
 - End of quarters and half-time
 - It should be easily accessible for ease of use at all times by all individuals during the games

- Suitable COVID-19 disposable bins need next to each team bench
- Bench use of chairs preferable, spaced 1 meter apart. If use of benches is the only option, marking 1m between each player is necessary
- Court configurations can be changed as necessary
- Substitutions can occur directly from the bench, rather than the score table
- Avoid shouting at all times due to the increased risk of aerosol transmission
- Have two match balls for the game, one can be wiped down as the game continues
- Ball wiping by officials at all major stoppages (at the end of quarters/ time-outs)
- Face covering are mandatory for all coaches, table officials, statisticians and all other support staff
- Any staff involved with floor cleaning should wear face coverings and be mindful to wash hands immediately at half time and full time. There is no requirement to wear gloves as long as hand washing regime is followed.
- The cleaning of any blood/mucus/sputum/vomit should be in adherence with local policies
- It is the Match Promoter's responsibility to collect all screening documents and make sure they are all filled out properly by both teams and all officials. The documents should then be passed onto the Club COVID-19 Officer.
- Time-outs will be one minute but has to accommodate suitable time for hand sanitisation. Officials to be mindful of this. Every team should conduct their timeout with a minimum of 1m between each player or staff member for the duration, in line with **Appendix 7**. Both teams to conduct the timeout on the court if unable to distance at the bench.
- Officials to monitor social distancing during time-outs and between quarters
- Team kits in order to reduce the risk of transmission, each team will have to change to their kit prior to the second half commencing where possible and feasible. Prior discussion with the Match Promoter is encouraged here.

REFEREES, TABLE OFFICIALS AND STATISTICIANS -FROM LEVEL 2 ONWARDS

- Please see Game Day Guidance (Appendix 9
- Be aware the home team is required to send Game Day Logistics Form to you at least seven days prior to the game
- It is recommended there is a designated area for ball wiping that is away from the main Table Officials i.e. on the far side of the court or at either end. Referees are responsible for the condition of the ball.
- If possible, attempt to limit amount of time near Table Officials or Statisticians
- Substitutions can occur directly from the bench rather than from a chair next to the Table Officials
- Table Officials and Statisticians advised to maintain distancing appropriate to carry out their tasks to reduce risk of infections
- Table Officials and statisticians are to wear a facial covering
- Referees, table officials and Statisticians are strongly recommended to wear face visors and must space at least 1m apart
- Referees and officials to allow suitable time for anybody treating an injured player, to follow suitable hand hygiene guidance following treatment of the injury before returning to the bench prior to the game recommencing.
- Officials are encouraged to report breaches in RTP guidelines to BE via the online **COVID Incident reporting form**
- Sanctions will be in line with Basketball England RTP Sanctions
 Appendix 8

MEDICAL PROVISIONS

- Where possible, all face-to-face contact should be reduced. Consider video consultation if suitable and appropriate
- The medical room size must be factored in when considering number of people allowed in the room to allow appropriate social distancing
- Only essential people should be in the medical room
- It would be advised to use an appointment system to reduce unnecessary congestion of the room
- As players and medical staff (therapist/doctor) are in close contact, ensure any consultation is conducted 2m apart
- Therapists need to be happy their insurance will cover them to treat individuals in the sport environment
- The clinician should wear appropriate PPE for all contact
- The clinician should consider whether it is appropriate to give the players or member a face mask while treatment or close contact is being carried out
- Keep close contact (within 2m) to the absolute minimum. Consider alternatives where appropriate to reduce close contact time
- Medical professionals should keep a record of who they see, even during a game, to help NHS Test and Trace
- If an injury occurs during the game, there will be a requirement that the individuals treating the player would be allowed time after the incident to be able to fully comply with hand hygiene requirements before the game recommences
- Ensure all first aiders are up-to-date with resus guidelines by Resus Council UK during COVID-19 pandemic https://www.resus.org.uk/ covid-19-resources/

AFTER TRAINING/GAMES

- Immediate hand washing or hand sanitising for a minimum of 20 seconds
- Advised against showering or changing at the venue (local policies may be in place as well)
- No congregating at the venue after your game
- No handshakes, high fives or other bodily contact
- Carpooling is not recommended from the venue
- Avoid public transport where possible
- Individuals will be required to wash their kit in 60°C high temperature wash in order to kill of any viral load

GUIDANCE FOR VENUES

- National government or Local Government regulations take precedence
- Additional venue requirements/procedures may be required for consideration
- Abide by guidelines set out in **UK Active Framework**
- Normal Operating Procedures to be visible
- Emergency Operating Procedures to be visible
- Robust cleaning procedures in place and available on request
- Level 4 no use of indoor courts
- Level 2 Outdoor Up to 30 individuals per court, including players, coaches, staff
- Level 2 Indoor-Up to 30 individuals per court, including players, coaches, staff
- Plan for changeover of teams after sessions so there is time to deep clean all common areas and surfaces – venue responsible for the management of change overs
- Training for venue staff on management of spectators once we get to Level 1 to abide by social distancing measures
- Venue has to maximise ventilation opportunity open doors, windows etc – in order to reduce aerosol spread
- Use of toilets to be made available

- Recommended that toilets with restricted access or reduced availability have a one-in-one-out rule
- Suitable hand washing facilities must be available
- Venues must, when feasible, direct people via a one-way system to reduce contact times. This should have clear and obvious signage
- · Venue carparking should allow for social distancing adherence
- Should a venue be owned or leased by a club, adherence to Government venue guidelines should be adhered to at all times, including high levels of ventilation
- Club gatherings should be in line with Government social distancing guidelines
- Water fountains cordoned off
- Hand sanitiser available at entrance to the building
- Recommended:
 - Hand sanitiser on court
 - · Regular disinfection of heavily used areas and surfaces
 - Increased waste disposal bins and dedicated COVID-19 disposal signage
 - Separate entrance and exits to the court and main building clearly signed
 - COVID-19 symptom checker/poster at the entrance
 - Available PPE for medical emergency and staff with knowledge on how to apply
- Exceptions to above may apply for disability athletes or those requiring assistance to play basketball

D7. Social Distancing

By the very nature of the sport, basketball relies on us all to get close to one another. With the Government's **advice on social distancing** being implemented, this poses a number of challenges.

Basketball England has outlined guidance for the sport in relation to returning to play whilst adhering to the Government's social distancing guidelines.

Members need to be aware that local facilities may not be open despite basketball being available to play. It is assumed some schools may use their sports facilities to enable education in a social distancing environment.

Please refer to the **Outline RTP Roadmap**.

LEVEL 5 -LOCKDOWN

 In a state of 'lockdown' therefore no basketball permitted as per government guidelines

LEVEL 4 - HOUSEHOLD OR 1 OTHER

- All individuals will abide by the government's guidance on maintaining a 2 metre distance between anyone not within their household
- Only playing with one other person outside of their household at any time
- Single ball can be played with, **ONLY** if amongst household
- Only use outdoor courts

LEVEL 2 - RESTART COMPETITION

- Risk assessment completed and logged (see Appendix 6)
- Social distancing rules relaxed, and public gathering numbers increased by the government
- Currently social distancing guidelines stipulate 2m distance between individuals with occasional movement within that. We would strongly advise the 2m rule is maintained wherever possible and that the training sessions reflect this.
- Follow screening and hygiene guidance set out in this document
- Full team training allowed with up to 30 people per court (including coaches, players, support staff and officials)
- Ideally continue to work in small groups (bubbles) at training, with that group staying together during the sessions to reduce infection risk
- Parents or guardians at training may have to be asked to wait outside if the numbers within the venue are not able to be sustained for reasonable social distancing reasons or the risk assessment deems that it is not in the interest of the safety of individuals to allow such numbers to remain within the venue
- No spectators allowed for competitive fixtures
- · Indoor and outdoor courts available
- Training outside is preferable

- All high contact areas to be wiped down after session (benches, chairs, door handles, strength and conditioning equipment, tables etc)
- Competitive games can commence dependant on the latest government guidance and within public gathering limits and when Basketball England allow it. See Appendix 9 for more guidance.
- Competition rules will require teams to adhere to the social distancing and hygiene guidance set out in this document
- Travel should be minimised avoiding carpooling and public transport where able. If having to carpool, make sure:
 - Conduct screening prior to getting into the car. If no thermometer available, ask screening questions from **Appendix 3**
 - Share the transport with the same people each time
 - Keep to small groups of people at any one time



- Open Windows for ventilation
- Face away from each other
- · Clean your car between journeys using standard cleaning products
- Make sure you clean door handles and other areas that people may touch
- · Driver and passengers to wear a face covering
- Wear face coverings on coaches or minibuses
- Require regular hand sanitisation by passengers on a coach or minibus
- Limit the time you spend at garages, petrol stations and motorway services. Try to keep your distance from other people and if possible pay by contactless.
- Wash your hands for at least 20 seconds or sanitise your hands often, and always when exiting or re-entering your vehicle
- When finishing your journey wash your hands for at least 20 seconds or sanitise your hands as soon as possible
- Basketball England are advocating a full **Six Week Pre-Season Guidance** prior to commencing any competitions. This is to mitigate a spike in loading and injury rate. Please follow **BE Athletic Development Programme** to help all members reduce the injury rate once basketball commences.

LEVEL 1 - EXPAND COMPETITION

- Level 1 Expand Competition
- Full training able to commence
- Full timetable of fixtures able to commence, including NBL fixtures
- Travel distance rules relaxed
- Social distance rules relaxed
- Hygiene and screening guidance adhered as set out in this document
- Additional allowance for spectators although numbers may be restricted

LEVEL 0 - 'NEW NORMAL'

- Likely to happen only once the Government deems the disease has been truly stopped
- Full return to normal competition without the need for social distancing rules
- No need for screening measurements
- Good hygiene advised

ALL LEVELS MAY GO UP OR DOWN AS FURTHER INFORMATION ABOUT THE SPREAD OF COVID-19 COMES TO LIGHT. PLEASE BE AWARE THAT SHOULD LOCAL LOCKDOWN MEASURES BE IMPLEMENTED, BASKETBALL ENGLAND WILL CONSULT WITH THOSE TEAMS AND PROVIDE A SAFE LEVEL FOR PLAYING UNTIL THE GOVERNMENT DEEMS IT APPRPRIATE TO RETURN TO PREVIOUS LEVELS.

Further lockdown measures may apply to:

- Clubs
- Regions
- Nationally



RETURNING TO BASKETBALL AFTER HAVING **COVID-19**

Given the nature of this pandemic, the information, research and advice that is coming from all sources is constantly changing. The severity of the symptoms will be different between everyone. Coupled with the fact that most will have mild symptoms if any at all, providing guidelines of any sort is difficult.

In severe cases of COVID-19, it is known that there can be an effect not just on the lungs but also on the heart. Myocarditis is a serious condition where inflammation of the heart muscle can put extra strain on the ability of the heart to function properly. We are aware therefore that the length of time to return to physical activity in individuals that have had moderate to severe symptoms may be longer than expected. A further more recent outcome appears to be individuals with high levels of fatigue. This would not present as anything physical but the individual will feel more tired than normal. In extreme cases individuals may not be able to play basketball as a consequence.

Please refer to this **infographic** from Imperial College London on symptoms and returning to sport.

It is also advised that all members visit the **Sport Science and Medicine section** of the Basketball England website for further information on recovery strategies, injury prevention, mental health, nutrition and more to aid their own recovery if they have had COVID-19.

NONE TO MILD SYMPTOMS

These would be classed as symptoms that did not last more than 1 week and did not require a doctor or hospital assessment. This will be the vast majority of individuals that contracted COVID-19.

- · Advised 4-week graded return to physical activity including basketball
- Should start exercising at least seven days after the last symptoms have resolved
- Could start with walking and then build up
- Follow the **Basketball England Athletic Development Programme** to have a graded return to basketball specific activity
- As returning to sport, monitor symptoms and make sure you feel comfortable when running and exercising

MODERATE SYMPTOMS

Classed as having to be seen by either a GP or hospital staff. No diagnosis of longer-term lung or heart problems.

- · Advised to take 2 months to return to high level physical activity
- Can show high levels of fatigue.
- Follow the Basketball England Athletic Development Programme to have a graded return to basketball specific activity
- Monitor symptoms throughout the return to activity as any rise in temperature or other symptoms may cause further stress on a recovering body and therefore put you at higher risk of injury or illness

SEVERE SYMPTOMS

Any individual that has been admitted to hospital for management of COVID-19 and in the worse cases, been intubated in Intensive Care.

- Most individuals will have a management plan given to them from their hospital
- Individuals will be looking at approximately three months to return to normal activity levels, and this may increase if a diagnosis of myocarditis or other complications has been made
- Start physical activity with walking
- Monitor signs and symptoms throughout including breathlessness and fatigue as this would indicate the body struggling to cope with the level of exercise
- · Seek guidance from a rehab specialist, such as a physiotherapist
- When able, follow the Basketball England Athletic Development Programme to have a graded return to basketball specific activity

09.Resources

COVID-19 INFORMATION

Dr Dane Vishnubala COVID-19 Blog - Link

NHS - https://www.nhs.uk/conditions/coronavirus-covid-19/

PHE - https://www.gov.uk/government/organisations/public-health-england

WHO - https://www.who.int/emergencies/diseases/novel-coronavirus-2019

ONS - Deaths per ethnic group https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/coronavirusrelateddeathsbyethnicgroupenglandandwales/2march2020to10april2020

ICO COVID-19 Data holding - https://ico.org.uk/global/data-protection-and-coronavirus-information-hub/data-protection-and-coronavirus/workplace-testing-guidance-for-employers/

NHS Testing and tracing - https://www.nhs.uk/conditions/coronavirus-covid-19/testing-for-coronavirus/

Returning to Sport after COVID-19 - https://www.imperial.ac.uk/media/imperial-college/administration-and-support-services/sport/public/Return-to-Training-Following-COVID-19-Infographic.pdf

Outdoor Sport and Recreation Guidance - https://www.gov.uk/government/ publications/coronavirus-covid-19-guidance-on-phased-return-of-sport-andrecreation/guidance-for-the-public-on-the-phased-return-of-outdoor-sportand-recreation

HYGIENE INFORMATION

WHO - https://www.who.int/emergencies/diseases/novel-coronavirus-2019/ advice-for-public

NHS hand washing - https://www.nhs.uk/live-well/healthy-body/best-way-towash-your-hands/

Use of masks - https://www.bmj.com/content/369/bmj.m1435

SOCIAL DISTANCING

NHS - https://www.nhs.uk/conditions/coronavirus-covid-19/staying-at-home-to-avoid-getting-coronavirus/

PHE - https://publichealthmatters.blog.gov.uk/2020/03/04/coronavirus-covid-19-what-is-social-distancing/

ISOLATION INFORMATION

NHS – https://www.nhs.uk/conditions/coronavirus-covid-19/what-to-do-if-youor-someone-you-live-with-has-coronavirus-symptoms/staying-at-home-if-youor-someone-you-live-with-has-coronavirus-symptoms/

PHE - https://publichealthmatters.blog.gov.uk/2020/02/20/what-is-self-isolation-and-why-is-it-important/

EQUIPMENT

Fit4Sport PPE equipment, thermometers, sanitisier, masks etc. - 10% OFF for members with the code BBEPPE10 - https://fit4sportltd.com/

ProActive Symptom Tracker - https://www.basketballengland.co.uk/news/rtpbasketball-england-symptom-checker-app-and-ppe-offer/

VENUE GUIDELINES

UK Active - https://sportengland-production-files.s3.eu-west-2.amazonaws. com/s3fs-public/2020-05/ukactive%20framework%20for%20re-opening%20 the%20gym%20and%20fitness%20industry.pdf?lirYhkBXmffAVf9ffdPMjpDrN-6vmEW1P=

Cleaning - https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings

MENTAL HEALTH SUPPORT

Mind.org - https://www.mind.org.uk/information-support/coronavrus-and-your -wellbeing/

HSENI – Wellbeing at work - www.hseni.gov.uk/stress

APPENDIX 1: Covid-19 club officer - role and key responsibilities

Basketball England are requiring each club to nominate an individual to become the Basketball COVID-19 Officer - details of the individual will need to be provided during team entry/registration process. This individual should have a knowledge of safeguarding, GDPR and be able to access the Basketball England website for further information on this evolving pandemic. It is suggested that the clubs Safeguarding Officer or Club Secretary could undertake this role.

The key roles and responsibilities will include:

- Ensure the club is compliant with Basketball England COVID-19 guidance and current Government guidance (formation of a COVID-19 Committee may help to distribute roles and responsibilities across a club during this re-start phase).
- Responsibility for completing appropriate COVID-19 risk assessments.
- Keeping abreast of developments within the UK and basketball itself to reduce the risk of COVID-19 infection and communicate it to all club members. Sources of information may include:
 - The Basketball England website
 - Basketball England's social media outlets
 - FIBA website
 - · NHS
 - UK Government website
- Lead on screening of all players and staff for each training session or game, in accordance with the guidelines in this document.
- · Upskill other staff or coaches to be able to conduct the screening.

- Responsibility for the collection and appropriate storage of screening forms and attendance forms.
- Responsibility for contact-tracing in relation to the individuals that have been in contact with a suspected case of COVID-19 within the basketball session, once an individual has notified the club that they have been infected with COVID-19.
- Responsibility for directing an individual that has been infected by COVID-19 to report this to the NHS and get a test in order to commence NHS led contact tracing.
- Reporting any current COVID-19 infection to Basketball England via this form.

APPENDIX 2:

TEMPLATE COVID-19 BASKETBALL RISK ASSESSMENT - LEVEL 3; GET IN, GET BETTER, GET OUT

Further risk assessments for Level 2 to become available in due course

TEMPLATE COVID-19 CLUB RISK ASSESSMENT – LEVEL 3

COVID-19 is a new illness that can affect your lungs and airways. It is caused by a virus called Coronavirus. Symptoms can be mild, moderate, severe or fatal. This template risk assessment must be considered alongside the Basketball England Return to Play guidelines and the club's other Health and Safety documents. The risk assessment process must be subject to continual review. It is the responsibility of the COVID-19 Officer to ensure that this risk assessment remains up-to-date and in line with current Basketball England and Government guidance.

Club Name:	COVID-19 Officer:
Name of Activity:	Venue:
Assessment carried out by:	Date assessment was carried out:
Date of Review:	

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	Signs detailing COVID-19 symptoms at venue/court entrance All participants should be screened, and attendance documented. Any individual who answers positively to the screening questions should be advised to return home and self-isolate in line with government advice. Screening data to be sent to Basketball England	 All attendees reminded of the following: No bodily contact, including handshakes/high fives Wash hands thoroughly for 20 seconds after going to the toilet and use alcoholbased hand rub Social distancing rules apply – 2m No congregating once training or a game has ended 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	Screening should be set up away from building entrances/exits Maximum of 6 participants, including coaches and support staff. Ensure two adults are present at all practices involving U18s Use of face masks advised for coaches and support staff. Players may use masks but this could restrict breathing Hand sanitiser available at entrances to the building and on courtside – should be applied regularly Suitable hand washing equipment available in toilets and changing rooms Attendees advised before leaving the house, they should check they do not have a high temperature, do not have a persistent cough, they have not lost their sense of taste and/or smell, they have not been in contact with a person with suspected COVID-19 within the past 48 hours, they have not been advised to self-isolate as per NHS guidance Train outside, if possible. Open any doors that surround an indoor court if possible, to ensure maximum ventilation and reduce aerosol spread	 All attendees reminded of the following: No bodily contact, including handshakes/high fives Wash hands thoroughly for 20 seconds after going to the toilet and use alcoholbased hand rub Social distancing rules apply – 2 metres No congregating once training or a game has ended. 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infected surfaces in the building - e.g. door handles, chairs and benches	Players, coaches, and support staff	Regular disinfection of heavily used areas and surfaces COVID-19 bin available to dispose of cleaning equipment Hand sanitiser available on court and in the entrance to building. Use separate entrances and exits to the court, where possible	 All attendees reminded to: Avoid touching high contact surfaces e.g. door handles, benches, chairs. Use hand sanitiser frequently during practice 			
Infected equipment - e.g. basketball, water bottles, towels	Players, coaches and support staff	All players and coaches bring their own equipment No use of bibs unless brought directly by the player No water bottles should be provided by coaches/clubs Drills must be for individuals only and no ball passing should take place Players must retrieve own balls	 All attendees reminded to: Not share water bottles, balls or any other equipment All basketballs should be washed or wiped down before and after the session 			
Lack of space to maintain social distancing	Players, coaches and support staff	Only groups of up to 6 individuals including coaches and staff must be present No team-based or contact drills. Train outside if possible No spectators to be permitted to stay	All attendees reminded to: • Always stay 2m apart			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Transport to and from sessions	Players, coaches and support staff	Car-pooling should not be advocated and public transport and coaches/ minibuses are not advised				
Toilets and changing rooms	Players, coaches, and support staff	Cleaned regularly Suitable hand washing equipment available in toilets and changing rooms Venues should operate a one-in, one-out rule where toilets have restricted access	 All attendees reminded to: Arrive changed, ready to play Avoid prolonged time in the toilet Avoid showering and changing at venue where possible Wash hands thoroughly for 20 seconds and use an alcohol-based hand gel after going to the toilet 			
Infection passed on by non-participants - i.e. spectators and members of the public	Players, coaches and support staff	Coaches and all support staff should meet players outside of the building Parents should not be permitted to enter the venue Players and coaches should avoid leaving the court unless it is to go to the toilet Use doors which lead directly onto court, if possible	All attendees reminded to: • Stay on court			
Increased risk to individuals with underlying medical conditions and those from BAME groups	Those with underlying medical conditions and BAME groups	Staff should make sure any participants within high risk group have all risk assessment information available so they can make an informed choice about joining the session	Those individuals with underlying medical conditions to complete Appendix 4 of the Return to Basketball Guidance			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Risk to those returning to participate after being affected severely by COVID-19	Players, coaches and support staff	Follow medical guidance and/or Basketball England Athletic Development Programme Medical Advice				
Social distancing not being adhered to due to first aid or injury treatment required	Players, coaches and support staff	First Aider to ensure face mask is worn and hands and equipment are sanitised before and after treatment Waste disposed of safely. Accident form completed		First Aider		
Detriments to mental health	All individuals	Clubs to promote mental health & well-being awareness to club members Clubs to have a dedicated Welfare Officer	Regular communication of mental health information and an open-door policy for those who need additional support	Welfare Officer Coaches		

APPENDIX 3: BASKETBALL ENGLAND COVID-19 SCREENING DOCUMENT

Date and Time:

Venue (state whether indoor/outdoor):

Name of individual conducting the screening:

PLEASE INFORM CLUB COVID-19 OFFICER IF ANY INDIVIDUAL IS FOUND TO BE POSITIVE.

Screening questions:

- Have you been in contact with anyone with or suspected of having COVID-19 in the last 48 hours?
- Has anyone in your household had COVID-19 symptoms in the last 2 weeks?
- Have you been advised to self-isolate due to an infection within another setting, such as school or work?
- Have you returned from a foreign country in the past 10 days, one without a travel bridge and therefore should be in quarantine?
- Do you have a new persistent cough?
- Have you had any loss of taste or smell?
- Do you have any underlying health conditions that would put you at further risk should you contract COVID-19?
 - Cardiovascular problems
 - High blood pressure
 - Diabetes
 - Chronic kidney or liver disease
 - Compromised immunity diseases
 - Obesity (BMI 40+)

Name	Age	Temp	Contact within 48 Hrs (Y/N)	Loss of smell or taste (Y/N)	New persistent cough (Y/N)	Underlying illness (Y/N)	Returned from Travel? Where? (Y/N)	Self-Isolating from School/ Work (Y/N)
				ļ				

APPENDIX 4: CLUB MEMBERS COVID-19 RISK INFORMATION (TO SEND TO ALL MEMBERS)

PERSONAL AND HOUSEHOLD RISK INFORMATION

This information sheet aims to inform you of those who are most at risk should they contract COVID-19. You should identify whether you or a member of your household is at higher risk. If you are, please discuss the risk of returning to basketball with your GP and your Club COVID-19 Officer to make an informed decision as to whether returning to group basketball is appropriate and safe for you and your family. While research around risk is ongoing, we simply hope to inform you so you can make the right decision for you and your household.

If any of the following statements apply to you or a household member, then this means that either you or a household members risk is increased. If it applies to a household member then you need to discuss it with your GP and the household member to make a decision on if a return to basketball is appropriate in a group setting, as it is possible to pass on the virus to a more vulnerable individual.

Statements apply to **YOU or your HOUSEHOLD**

Had a solid organ transplant

Undergoing treatment currently or in last 6 months for any cancer

Currently taking or in the last 6 months have taken immunosuppressant medication

Have a respiratory condition including all cystic fibrosis, **severe** asthma and severe chronic obstructive pulmonary (COPD)

Have any rare diseases or inborn errors of metabolism that significantly increase the risk of infections (such as Severe Combined Immunodeficiency (SCID), homozygous sickle cell)

Pregnant

Aged 70 or older

Have one or more of the underlying health conditions listed below:

- Chronic (long-term) mild to moderate respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
- Chronic heart disease, such as heart failure
- Chronic kidney disease
- Chronic liver disease, such as hepatitis
- Chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), or cerebral palsy
- Diabetes

• A weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets

• Being seriously overweight (a body mass index (BMI) of 40 or above)

Are you providing caring responsibilities for anyone meeting any of the above criteria?

Should any of the above statements apply to you or your household, please notify your COVID officer and speak to your GP to allow you to make an informed decision that protects you and your household.

APPENDIX 5: BASKETBALL SPECIFIC GUIDANCE FOR ELITE RETURN TO SPORT

The Government has released specific guidance in relation to the Return to Play for athletes deemed as 'Elite'. The definition of which is confirmed as:

- · An individual who derives a living from competing in a sport
- · A senior representative nominated by a relevant sporting body
- A member of the senior training squad for a relevant sporting body
- Aged 16 or above and on an elite development pathway

For basketball this will include:

- 1. Professional players under contract by British Basketball League/Womens British Basketball League clubs
- 2. Professional players under contract by National Basketball League Division One clubs
- 3. Current England/Great Britain who are aged 16+ (U18, U20 & Senior players)
- 4. Student athletes on the England Development Programme (Elite Academy Basketball League/Womens Elite Academy Basketball League)

For the above-named athletes that play within a Basketball England organised league or competition, a return to indoor training in line with level 2 of our Return To Play Roadmap is permitted if:

- The athlete wishes to return to training
- The club/institution that you are contracted to and/or are under the 'Duty of Care' of consents to you returning to training activity
- Full compliance with the processes and protocols detailed in this Return To Play guidance document is followed
- Your club/institution's lead physician commits to undertaking the COVID-19 Officer role detailed in our guidance document. This is in line with Government guidance regarding return to sport for elite performers. If no physician is available, as the Government document states, clubs 'should secure medical cover to oversee these processes prior to resuming organised training'.
- Venues are accessible and permissible following the guidance that is place from venue operators/owners.

APPENDIX 6: TEMPLATE COVID-19 BASKETBALL RISK ASSESSMENT - LEVEL 2; RESTART COMPETITION

COVID-19 is a new illness that can affect your lungs and airways. It is caused by a virus called Coronavirus. Symptoms can be mild, moderate, severe or fatal. This template risk assessment must be considered alongside the Basketball England Return to Play guidelines and the club's other Health and Safety documents. The risk assessment process must be subject to continual review. It is the responsibility of the COVID-19 Officer to ensure that this risk assessment remains up-to-date and in line with current Basketball England and Government guidance.

Club Name:	COVID-19 Officer:
Name of Activity:	Venue:
Assessment carried out by:	Date assessment was carried out:
Date of Review:	

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	Signs detailing COVID-19 symptoms at venue/court entrance. All participants (including officials) should be screened and attendance documented. Any individual who answers positively to the screening questions should be advised to return home and self-isolate in line with government advice. Screening data to be kept within the club for 21 days before confidentially destroying in-line with GDPR	 All attendees reminded of the following: To lower the frequency of bodily contact, players/ teams must have no handshakes, celebrations/ high fives Players reminded not to help one another off the floor, to reduce touching of hands Player huddles must allow for social distancing of 1m+ 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	Screening should be set up away from building entrances/exits Maximum of 30 people per court including players, coaches, support staff and officials. Ensure two adults are present at all practices involving U18s Practice in small groups in training whenever possible, with that group working together throughout to reduce risk of transmission Contact training should be limited to 20-minute intervals Use of face coverings mandatory for coaches and support staff indoors and strongly recommended outdoors. Players may use masks, but could restrict breathing Hand sanitiser available on entrances to building and on courtside – should be applied regularly. Application on arrival, before training, every 20 minutes during training, at the end of training and on leaving the venue Suitable hand washing equipment available in toilets and changing rooms	 Wash hands thoroughly for 20 seconds after going to the toilet and use alcoholbased hand rub Avoid shouting at all times due to the increased risk of aerosol transmission Social distancing rules apply if not on the court in a playing capacity No congregating once training or game has ended Clear signage to ensure a singular flow of people in and out of the venue 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	Attendees advised before leaving the house, they should check they do not have a high temperature, do not have a persistent cough, they have not lost their sense of taste and/or smell, they have not been in contact with a person with suspected COVID-19 within the past 48 hours, they have not been advised to self-isolate as per NHS guidance. They have read the Basketball Risks sheet supplied in the RTP document (Appendix 4). They are not shielding or living with anyone that is either high risk or shielding. They have not returned from foreign travel from a country that does not have a travel bridge in the last 10 days Train and play outside if possible. If indoor is permissible, ensure that any doors/windows that surround an indoor court are open to allow ventilation				
Infected surfaces in the building - e.g. door handles, chairs and benches	Players, coaches, support staff	Regular disinfection of heavily used areas and surfaces COVID-19 bin available to dispose of cleaning equipment Hand sanitiser available on court and entrance to building. Use separate entrances and exits to the court where possible	 All attendees reminded to; Avoid touching high contact surfaces - e.g. door handles, benches, chairs. Use hand sanitiser frequently during practice 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infected equipment - e.g. basketball, water bottles, towels	Players, coaches and support staff	Players/teams and officials should arrive at the venue in their game attire to avoid using changing rooms No water bottles should be provided by coaches/clubs All water bottles named Team-based training and game play is permitted, including the passing of balls between players COVID-19 bin available to dispose of cleaning equipment	 All attendees reminded of the following: Not share water bottles Basketballs should be washed or wiped down before, during (every 20 minutes) and after the session Have two match balls for games, one can be wiped down as the game continues Ball wiped by officials at all major stoppages (at the end of quarters/ time-outs) 			
Transport to and from sessions	Players, coaches and support staff	Car-pooling isn't advised and public transport and coaches/mini-buses are not advised	If car pooling / sharing transport is unavoidable, participants advised of the safety measures outlined in RTP - Level 2			
Toilets and changing rooms	Players, coaches and support staff	Cleaned regularly Suitable hand washing equipment available in toilets and changing rooms Venues should operate a one-in-one-out rule when toilets have restricted access No sharing of towels by players, staff or officials	 All attendees reminded of the following: Arrive changed, ready to play Avoid prolonged time in the toilet Avoid showering and changing at venue where possible Wash hands thoroughly for 20 seconds and use an alcohol-based hand gel after going to the toilet 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection passed on by non-participants i.e. spectators and members of the public	Players, coaches and support staff	Coaches and all support staff should meet players outside of the building Parents and spectators to not be permitted in the venue for practice. No spectators to be permitted at competitive fixtures Players and coaches should avoid leaving the court unless it's to go to the toilet Use doors which lead directly onto court if possible	All attendees reminded to; • Stay on court • Hand sanitise regularly			
Increased risk to individuals with underlying medical conditions and those from BAME groups	Those with underlying medical conditions and BAME groups	Staff should make sure any participants within high risk group have all risk assessment information available so they can make an informed choice about joining the session	Those individuals with underlying medical conditions to complete Appendix 4 of the Return to Basketball Guidance			
Risk to those returning to participate after being affected severely by COVID-19	Players, coaches and support staff	Follow medical guidance and/or BE Athletic Development Programme Medical Advice	Depending on the severity of the COVID-19 symptoms certain individuals may need to consult a doctor to get approval to return to playing sport			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Social distancing not being adhered due to first aid or injury treatment required	Players, coaches and support staff	First Aider to ensure face covering is worn and hands and equipment are sanitised before and after treatment Waste disposed of safely Accident form completed		First Aider		
Detriments to mental health	All individuals	Clubs to promote mental health and well-being awareness to club members Clubs to have a dedicated Welfare Officer	Regular communication of mental health information and an open-door policy for those who need additional support	Welfare Officer Coaches		
Safeguarding Children and Adults at Risk	Children and Adults at Risk	Club Welfare Officer to follow the Covid-19 Advice in the BE Safeguarding Policy - page 24		Welfare Officer Coaches		

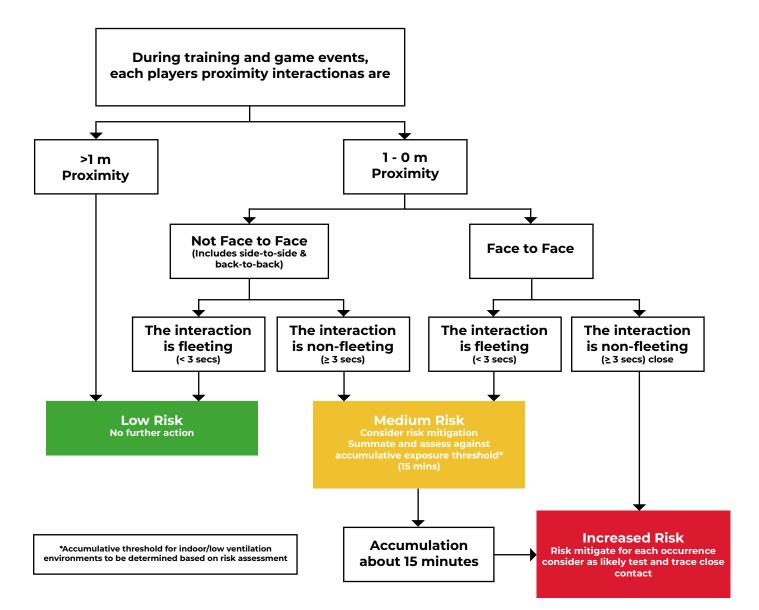
APPENDIX 7: CONTACT IN COMPETITIVE BASKETBALL AND COVID-19 MITIGATION STRATEGIES

As we move from Level 3 to Level 2 in our Return To Play (RTP) Roadmap we will be reintroducing team-based training and competitive basketball.

In addition to the guidance already provided in relation to hygiene, venue and screening we have assessed the level of contact in the game of basketball in comparison to the risk exposure this would open the basketball community up to in the event that our screening processes don't flag up a participant with COVID-19.

In partnership with the Department of Culture, Media & Sport (DCMS) a group of five team sports (Football, Rugby Union, Netball, Rugby League, Basketball) have come together and have devised a 'Return to Recreational Team Sport' strategy that is predicated on the below 'Exposure Framework':

A TEAM SPORT RISK EXPOSURE FRAMEWORK TO INFORM RISK MITIGATION STRATEGIES & SUPPORT TEST & TRACE



Ben Jones, Gemma Phillips, Simon Kemp, Keith Stokes

Contact is defined as being 'within 1m of another person', this doesn't necessarily mean that physical contact has been made and can be further classified in a number of ways dependent on whether your position relative to the other person is:

- side to side
- front to front
- front to back

Basketball England have undertaken a small research project where games spanning male, female, senior, youth, recreational and professional settings were assessed to understand the total amount of 'contact' takes place in a game of basketball to ascertain whether the sport is at a low, medium or high risk when returning to competitive training and games.

For each game, players in guard and forward positions were tracked as per below:-

- Total number of contacts (defined as being inside 1m)
- Contact type (Side to Side, Front to Front, Front to Back)
- · Duration of the contact (more or less than 3 seconds)
- Duration of the contact if over 3 seconds
- Purpose of the contact if over 3 seconds

INITIAL FINDINGS

The below provides an average taken from the data for forwards and guards:

Forwards

- 84 contacts per 10 minutes played
 - 75 are less than 3 seconds
 - 9 are more than 3 seconds
- Average contact time of more than 3 seconds is 6.1 seconds
- Contact types for forwards are ranked as below:
 - Side by Side 70%
 - Front to Back 22%
 - Face to Face 8%
- Purpose of contact over 3 seconds
 - Jump ball situation (face to face) Average 8 seconds
 - Backing down a player to the basket (front to back) Average 4 seconds
 - Boxing out (varies) Average 3.5 seconds
 - Team huddles on the court during dead balls (face to face) Average 5 seconds
 - Free throws (side by side) Average 15 seconds

In summary, Forwards are exposed to 3.4 mins of contact per 10 mins, which is **13.66 mins** if they play the full 40min game.

Guards

- 56 contacts per 10 minutes played
 - 48 are less than 3 seconds
 - 8 are more than 3 seconds
- Average contact time of more than 3 seconds is 8 seconds
- Contact types for forwards are ranked as below:
 - Side by Side 65%
 - Front to Back 25%
 - Front to Back 10%
- Purpose of contact over 3 seconds
 - Jump ball situation (side by side)– Average 8 seconds
 - Being pressured full court defensively (face to face) Average 4 seconds
 - Team huddles on the court during dead balls (face to face) Average 5 seconds
 - Free throws (side by side) Average 15 seconds

In summary, Guards are exposed to 2.6 mins of contact per 10 mins, which is **10.66 mins** if they play the full 40min game.

MITIGATION STRATEGIES

Although the above initial assessment deems basketball as low/medium risk, it doesn't take into consideration two main areas of the game that will need clear mitigation to avoid increased contact time. They are:

1. Bench configuration – To ensure a 1m+ distance between players on the bench and the coaching/support staff.

Teams and venues will need to lengthen the player seating area for each team allowing players to be sat (if safe to do so) on the opposite side of the court. Players will have their own nominated seating area which should not be changed during the game. They will also not be required to go to the officials table to enter the game, the game officials will allow the players onto court directly from their chair/bench space.

2. Time-outs – To avoid lengthy huddles where players are inside 1m contact with multiple players.

Timeouts should remain at one minute but need to allow for all players to configure themselves safely on the court to undertake the timeout. Timeouts must not be conducted in a close huddle therefore the team may spread out over the court area if required. All players will be required to use hand sanitiser at this point as well. Note that officials should be lenient on the timings of the timeout if hand hygiene has taken time.

Officials are required to wipe down the ball as per our hygiene guidance. .

ADDITIONAL CONSIDERATIONS

To further restrict the amount of contact we are advocating that the below areas are considered and adopted by teams:

- 1. Limit player huddles on court during dead ball situations or ensure that your players maintain a 1m+ distance with teammates
- 2. Do not help teammates who may have fallen over during play to return to their feet. Although this might sound in contrary to being a good team mate, helping someone to their feet will involve hand contact with another player and provide another opportunity for virus transmission.
- 3. As per RTP guidance avoid handshakes, high fives etc

TRAINING CONSIDERATIONS

Whereas the above relates directly to a game of basketball we must also consider the training environment in relation to contact training, its duration and mitigation strategies.

The below principles should be applied by clubs, coaches when devising their session plans:

- 1. Limit player huddles during training or ensure that your players maintain a 1m+ distance with the coach and teammates. Where possible it is advised to keep players spaced out across the court to give instructions etc.
- 2. Contact training is permitted but should be delivered in short sections of no longer than 20 minutes with breaks for ball and hand cleaning (see points 4 & 5)
- 3. Team based scrimmaging is permitted, please follow the mitigation strategies mentioned above for players not on the court ensuring they are spaced accordingly to allow for a 1m+ space between players
- 4. As per our hygiene guidance, balls must be cleaned every 20 minutes during practice sessions
- 5. During ball cleaning breaks, players should be advised to clean their hands with hand sanitiser gels/sprays etc

APPENDIX 8: RTP BREACH - PROTOCOL AND SANCTIONS

The primary aim of the Return to Play is the health and safety of all our members, volunteers and staff as we return to basketball. As a consequence, we will be taking the breaching of the RTP guidance seriously. All individuals involved with basketball have the responsibility to keep the game free from COVID-19 and adhering to the guidance.

If an individual believes there has been a breach of the guidance putting the health and safety of other players, volunteers and staff at risk they are able to report this by phone (0300 600 1170) or email (support@basketballengland.co.uk).

We are approaching RTP breaches from a position of support and education rather than formal sanctions. However, if repeated breaches occur within a club/league setting we have the option of raising a formal 'cause for concern' which will be investigated in line with our existing complaints procedures.

Repeated RTP breach sanctions may include:

- Club being placed into a temporary lockdown situation
- · Removal of insurance cover for the individual or club
- Reduction of points for teams
- Expulsion from leagues

APPENDIX 9: GAME DAY GUIDANCE

Click here for Basketball England's Return to Play - National Competition Game Day Guidance.

Click here for Basketball England's Local Junior League Guidance.

Click here for British Basketball Leagues Secure Play Guidance.

APPENDIX 10: GAME DAY LOGISTICS

CLUB NAME	
CLUB COVID OFFICER NAME AND CONTACT DETAILS	
DATE OF GAME	
MATCH PROMOTOR CONTACT	
OTHER RELEVANT CONTACT DETAILS	

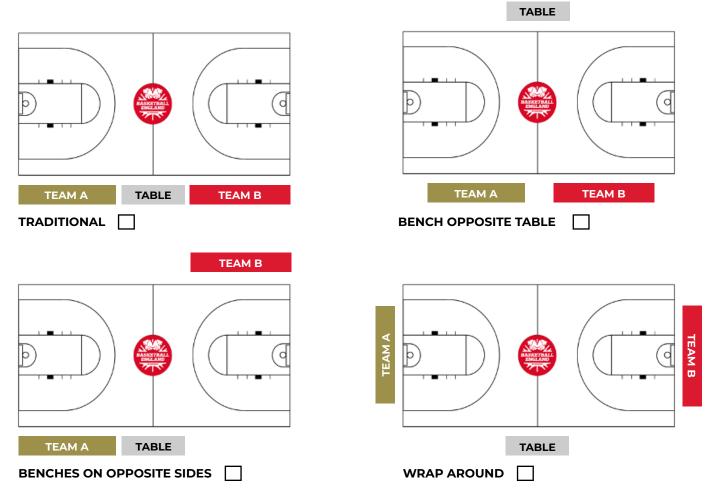
GAME DAY INFORMATION:

VENUE ADDRESS (Google Link)	
VENUE ENTRANCE	
VENUE EXIT	
WHERE SCREENING WILL TAKE PLACE?	
(Diagram may help)	
GAME TIP TIME	
COURT ACCESS TIME	
VIDEO LINK (walk through of site)	

OTHER INFORMATION:

IS THERE A ONE-WAY SYSTEM IN PLACE?	
ARE CHANGING ROOMS AVAILABLE?	
CAN YOU WARM UP ON COURT?	
IS THERE A GAME BEFOREHAND?	
IS THERE A FIRST AIDER ON SITE?	
LOCATION OF DEFIB?	

COURT MAP - Please choose set-up most similar below



THIS FORM TO BE SENT TO THE OPPOSITION CONTACT AND ALL OFFICIALS FOR THE GAME.

APPENDIX 11: TEMPLATE COVID-19 BASKETBALL RISK ASSESSMENT - LEVEL 2;GAME DAY ONLY

COVID-19 is a new illness that can affect your lungs and airways. It is caused by a virus called Coronavirus. Symptoms can be mild, moderate, severe or fatal. This template risk assessment must be considered alongside the Basketball England Return to Play guidelines and the club's other Health and Safety documents. The risk assessment process must be subject to continual review. It is the responsibility of the COVID-19 Officer to ensure that this risk assessment remains up-to-date and in line with current Basketball England and Government guidance.

Currently UK Government Guidance does not allow for non-elite competitive basketball to occur outside the 'Rule of Six'. The government definition of 'elite' basketball allows the following leagues to be able to play competitive 5 v 5 basketball: BBL, WBBL, NBL Division 1 and WNBL Division 1, EABL and WEABL leagues. Junior basketball (U18 and below) is allowed to take place. Basketball within the educational setting (PE classes, school/college/university fixtures) is allowed. Should any guidance change we will communicate this as soon as possible.

Club Name:	COVID-19 Officer:
Name of Activity:	Venue:
Assessment carried out by:	Date assessment was carried out:
Date of Review:	

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	Signs detailing COVID-19 symptoms at venue/court entrance All participants (including officials) should be screened and attendance documented. Any individual who answers positively to the screening questions should be advised to return home and self-isolate in line with government advice. Screening data to be kept within the club for 21 days before confidentially destroying in-line with GDPR	 All attendees reminded of the following: To lower the frequency of bodily contact, players/ teams must have no handshakes, celebrations/ high fives Players reminded not to help one another off the floor, to reduce touching of hands Player huddles must allow for social distancing of 1m+ 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	Screening should be set up away from building entrances/exits Maximum roles per court are outlined in the RTP Game Day Guidance document. Teams must adhere to these roles and non-essential game day staff are not permitted on court. Ensure two adults are present on court for U18 games The home team is responsible for configuring the court to ensure adequate space is available for the player benches and scorers table. All individuals not on the court must be spaced 1m+ apart Use of face coverings mandatory for coaches and support staff indoors and strongly recommended outdoors. Players may use masks, but could restrict breathing Hand sanitiser available on entrances to building and on courtside – should be applied regularly. A two-ball rotation should be applied with ball wiping taking place during timeouts and quarter breaks Suitable hand washing equipment available in toilets and changing rooms	 Wash hands thoroughly for 20 seconds after going to the toilet and use alcoholbased hand rub Avoid shouting at all times due to the increased risk of aerosol transmission Social distancing rules apply if not on the court in a playing capacity No congregating once training or game has ended Clear signage to ensure a singular flow of people in and out of the venue and to toilets and other common areas 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	Attendees advised before leaving the house, they should check they do not have a high temperature, do not have a persistent cough, they have not lost their sense of taste and/or smell, they have not been in contact with a person with suspected COVID-19 within the past 10 days, they have not been advised to self-isolate as per NHS guidance. They have read the Basketball Risks sheet supplied in the RTP document (Appendix 4). They are not shielding or living with anyone that is either high risk or shielding. They have not returned from foreign travel from a country that does not have a travel bridge in the last 10 days				
Infected surfaces in the building - e.g. door handles, chairs and benches	Players, coaches, support staff	Regular disinfection of heavily used areas and surfaces COVID-19 bin available to dispose of cleaning equipment Hand sanitiser available on court and entrance to building. Use separate entrances and exits to the court where possible	 All attendees reminded to; Avoid touching high contact surfaces - e.g. door handles, benches, chairs Use hand sanitiser frequently 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infected equipment e.g. basketball, water bottles, towels	Players, coaches and support staff	Players/teams and officials should where possible arrive at the venue in their game attire to avoid using changing rooms No water bottles should be provided by coaches/clubs. All water bottles named No sharing of towels or other game equipment COVID-19 bin available to dispose of cleaning equipment	 All attendees reminded of the following: Not share water bottles. Basketballs should be washed or wiped down before, duringand after games Have two match balls for games, one can be wiped down as the game continues Ball wiped by officials at all major stoppages (at the end of quarters/ time-outs) 			
Transport to and from sessions	Players, coaches and support staff	Car-pooling isn't advised and public transport and coaches/mini-buses are not advised	If car-pooling sharing transport is unavoidable, participants advised of the safety measures outlined in RTP Game Day Guidance document			
Toilets and changing rooms	Players, coaches and support staff	Cleaned regularly. Suitable hand washing equipment available in toilets and changing rooms Venues should operate a one-in-one-out rule when toilets have restricted access No sharing of towels by players, staff or officials	 All attendees reminded of the following: Arrive changed, ready to play Avoid prolonged time in the toilet Avoid showering and changing at venue where possible Wash hands thoroughly for 20 seconds and use an alcohol-based hand gel after going to the toilet 			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Infection passed on by non-participants - i.e. spectators and members of the public	Players, coaches and support staff	Coaches and all support staff should meet players outside of the building No spectators to be permitted at competitive fixtures Inline with the latest government guidance Use doors which lead directly onto court if possible	All attendees reminded to; • Hand sanitise regularly			
Increased risk to individuals with underlying medical conditions and those from BAME groups	Those with underlying medical conditions and BAME groups	Staff should make sure any participants within high risk group have all risk assessment information available so they can make an informed choice about joining the session	Those individuals with underlying medical conditions to complete Appendix 4 of the Return to Basketball Guidance			
Risk to those returning to participate after being affected severely by COVID-19	Players, coaches and support staff	Follow medical guidance and/or BE Athletic Development Programme Medical Advice	Depending on the severity of the COVID-19 symptoms certain individuals may need to consult a doctor to get approval to return to playing sport			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
Social distancing not being adhered due to first aid or injury treatment required	Players, coaches and support staff	First Aider to ensure face covering is worn and hands and equipment are sanitised before and after treatment Waste disposed of safely Accident form completed		First Aider		
Detriments to mental health	All individuals	Clubs to promote mental health and well-being awareness to club members Clubs to have a dedicated Welfare Officer	Regular communication of mental health information and an open-door policy for those who need additional support	Welfare Officer Coaches		
Safeguarding Children and Adults at Risk	Children and Adults at Risk	Club Welfare Officer to follow the Covid-19 Advice in the BE Safeguarding Policy - page 24		Welfare Officer Coaches		

APPENDIX 12: TESTING PROTOCOL FOR NBL AND WNBL

Basketball England are aware of the increased COVID transmission rates and the increasing 'R' value. As an indoor sport which inherently carries additional virus transmission risks, we are taking further actions to reduce risk by working with NBL and WNBL clubs to undertake Lateral Flow Testing for all players and associated support staff.

This enhancement to our protocols has been set out in response to NBL and WNBL clubs reporting that they would feel more comfortable playing with an additional safeguard in place.

The introduction of testing aims to:

- Increase confidence in playing basketball in the NBL and WNBL
- · Identify asymptomatic COVID cases before they are able to spread the virus within their clubs
- · Allow for teams to meet from different parts of the country with minimal risk of COVID transmission
- · Increase the level of confidence amongst referees and officials

We strongly advise that if you as an individual or a club do not feel the measures are adequate for the safety of you and your family, you should not play the sport. Clubs should not place pressure on individuals to play basketball if they feel it is not safe to do so.

These protocols are outlined as extension measures to the current Basketball England Return to Play Guidance. All Basketball England RTP protocols should be followed at all times.

If any individual has any reservations in regards to testing please contact **Talent@basketballengland.co.uk**. Any potential exemptions will be assessed individually with our Sports Science and Medicine and safeguarding teams.

TESTING

We will work with our clubs to source Lateral Flow testing (LFT) for all players and staff to enable them to be tested a minimum of once a week but ideally twice a week. LFT's identify specific antigens to SARS-CoV-2 (COVID-19) that will be present if the individual has COVID-19.

Our minimum expectation is that clubs test all players and associated support staff at least once a week, 48 hours before a game. Ideally, we would like to test twice a week, the tests should be conducted at least 3 days apart.

LFT's allow quick turnaround results for positive tests. They are known to have an accuracy of 67-75% if completed twice a week with trained staff. However, the 'Gold Standard' testing is a Polymerase Chain Reaction (PCR) test which is conducted by the NHS Test and Trace system. In this instance, Basketball England are using LFT's to identify asymptomatic individuals before they are able to spread the COVID-19 virus amongst their team mates.

Please note:

If an individual is presenting with symptoms prior to the LFT then they should not have the test but they should selfisolate and contact the NHS COVID testing website to get a PCR test.

WHO CONDUCTS THE TESTS?

We suggest a number of people in the club are trained for the role. These may include:

- Medical staff
- Club COVID Officer
- Other member that does not have regular close contact with the team

The person conducting the tests should be wearing medium level PPE; gloves, masks, aprons.

Prior to undertaking the testing of players, Basketball England requires the individuals responsible to complete the following **Declaration of Competency Form** found **here**. 54

TRAINING

All individuals that will be administering the tests need to take part in the online learning webinar, practice on a club member and complete the **Declaration of Competency Form**.

HOW TO CONDUCT THE TESTS

Tests should be completed before team practice begins. We suggest an individual remains in their car or socially distanced until called forward for the test. All individuals should be wearing face coverings at all times. The test is completed and then the individual returns to their car to await the test results. Until the results are known, no one should be contact with anyone else from the club.

Also note that the individuals that are tested are the 'Testing Group' and that group should not interact with any other members of the club that are not tested.

WHAT IS IN THE TEST PACK?

A test pack contains:

- 25 testing kits which should be stored in a cool dry environment
 - Nasopharyngeal swabs
 - Buffer solution
 - Extraction buffer tube
 - Test cartridge

Please note that the tests that will be distributed from Basketball England are the **nasopharyngeal swab** tests.

Test Procedure

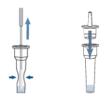
Nasopharyngeal swab

- Insert a swab into the nostril of the patient, and swab over the surface of the posterior nasopharynx.
- Insert the swab into an extraction buffer tube, and stir it more than 5 times while squeezing the tube.



or

 Remove the swab while squeezing the sides of the tube, and press the nozzle cap tightly onto the tube.



Nasal swab

- After getting a patient to blow one's nose, insert a swab into each turbinate and rotate it 5 times on both sides.
- Insert the swab into an extraction buffer tube, and stir it more than 10 times while squeezing the tube.



Analysis

 Apply 3 drops of extracted specimen to the sample hole of the test device.

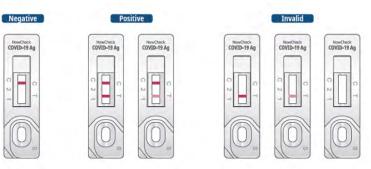


Read the test result in 15~30 min.
 Do not read after 30 min.



**	Do not						min.
	It	may	give	false	re	sults.	

Read test results between 15-30min. Test Result



An invalid test should be repeated.

POSITIVE RESULTS

If there is a positive result with the LFT the individual is required to self-isolate immediately and a PCR test is required. Clubs will be required to complete the **Covid-19 Incident Reporting Form**.

If the PCR test confirms the positive result that individual will have to self-isolate (along with members of the same household) for 10 days.

Given the mitigations of the testing, should an individual produce a positive test within the club environment, the club will have to take a risk adverse approach to isolating those within the club while the result of the PCR test is confirmed. The bubble (this may include the whole squad) of the player with the positive LFT will have to isolate if:

- There has been over 40 minutes of the training time that would be classed as contact training
- They have been travelling in the same car as other 'Test Group Meembers' to or from a venue
- They live in a house share with other team members
- If one other member of the squad has tested positive as well.

You will not have to isolate a team if:

- There is not more than one member with a positive test
- If you have played a team with a player testing positive at the weekend we are happy that the contact time will not be high enough to cause a transmission within a game environment
- You have not shared the car with the individual

A team will have to cancel all training and games if there are two LFTs that return positive. Everyone will have to await the results of the PCR tests. If only one PCR test is positive then the squad may return to training. Two positive cases will require the team to close down for the 10-day isolation period.

It is common for antigen tests to remain positive for some time after initial COVID-19 infection, which is representative of viral shedding and not necessarily infectivity. Advice from Public Health England is not to repeat antigen testing (LFT or PCR) for 90 days unless new development of symptoms.

If symptoms consistent with COVID-19 develop, repeat antigen testing is indicated by using a PCR test, therefore, all persons who have tested positive for COVID-19 (through either routine or following display of symptoms) and have completed their required isolation period, should not undergo repeat antigen testing for **90 days** - unless new development of symptoms occurs. Clubs will have to monitor these timelines carefully.

POINTS OF NOTE

- Training should still be conducted where possible in bubbles of 6.
- No more than **40 minutes** of each training session should involve contact.
- The test group need to isolate themselves as much as possible from all other. members of the club or public in order to reduce the risk of contracting COVID-19.



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