



BASKETBALL ENGLAND

# RETURN TO PLAY

GUIDANCE DOCUMENT

**LAST UPDATED JULY 27TH 2020**

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 have 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 with their counterparts outside of basketball. Advice from UK Government and FIBA have helped to shape these guidelines.

Please note that this document reflects the information and research gathered when this document 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**

We would stress that 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.

**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

B A S K E T B A L L E N G L A N D

## RETURN TO PLAY ROADMAP

BASKETBALL ENGLAND RESPONSE LEVEL	WHAT?	WHERE?	HOW?	WHEN?
<b>LEVEL 5</b>	<ul style="list-style-type: none"> <li>No public gatherings</li> <li>2m social distancing</li> <li>No travel allowed</li> </ul>	<ul style="list-style-type: none"> <li>Home or garden</li> </ul>	<ul style="list-style-type: none"> <li>No training</li> <li>No competitions</li> </ul>	<ul style="list-style-type: none"> <li>N/A</li> </ul>
<b>LEVEL 4</b>	<ul style="list-style-type: none"> <li>Public gatherings up to 2</li> <li>2m social distancing</li> <li>Limited travel times</li> </ul>	<ul style="list-style-type: none"> <li>Addition of outdoor courts</li> </ul>	<ul style="list-style-type: none"> <li>Play alone</li> <li>Play with household</li> <li>Play with one other</li> <li>No competitions</li> </ul>	<ul style="list-style-type: none"> <li>From 13th May 2020</li> </ul>
<b>LEVEL 3</b>	<ul style="list-style-type: none"> <li>Public gatherings up to 6</li> <li>2m social distancing</li> <li>No carpooling</li> </ul>	<ul style="list-style-type: none"> <li>Outdoor courts</li> <li>Indoor courts - Government-defined 'Elite' athletes only</li> </ul>	<ul style="list-style-type: none"> <li>Drills &amp; skills only</li> <li>No contact</li> <li>No competitions</li> <li>Coach-led sessions</li> </ul>	<ul style="list-style-type: none"> <li>From 4th June 2020</li> </ul>
<b>LEVEL 2</b>	<ul style="list-style-type: none"> <li>Public gatherings increased</li> <li>1m+ social distancing</li> <li>Limited carpooling</li> </ul>	<ul style="list-style-type: none"> <li>Outdoor &amp; indoor courts</li> </ul>	<ul style="list-style-type: none"> <li>Drills, skills &amp; team based training</li> <li>Behind closed door competitions</li> </ul>	<ul style="list-style-type: none"> <li>From 3rd August 2020</li> </ul>
<b>LEVEL 1</b>	<ul style="list-style-type: none"> <li>Public gatherings increased</li> <li>Social distancing removed</li> <li>Limited carpooling</li> </ul>	<ul style="list-style-type: none"> <li>Outdoor &amp; indoor courts</li> </ul>	<ul style="list-style-type: none"> <li>Drills, skills &amp; team based training</li> <li>Competitions with limited spectators</li> </ul>	<ul style="list-style-type: none"> <li>TBC</li> <li>Dependent on government guidelines</li> </ul>
<b>LEVEL 0</b>	<ul style="list-style-type: none"> <li>N/A</li> </ul>	<ul style="list-style-type: none"> <li>Outdoor &amp; indoor courts</li> </ul>	<ul style="list-style-type: none"> <li>Full training &amp; competition framework reinstated</li> </ul>	<ul style="list-style-type: none"> <li>TBC</li> <li>Dependent on government guidelines</li> </ul>

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.



[WWW.BASKETBALLENGLAND.CO.UK](http://WWW.BASKETBALLENGLAND.CO.UK)

# 03.

# COVID-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 2 days (48hrs) 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 (> 60) and have underlying conditions such as cardiovascular disease, raised blood pressure chronic lung disease, or diabetes.

There is growing evidence that 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) describe 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:

- 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 2 metre distance and where not possible, at 1 metre 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.



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

- The NHS currently recommends that close contact (within 1 metre of someone with the virus for 15 minutes or more) with an infected person **requires that individual** to be isolated for 14 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 lockdown period will have affected children in many different ways. While most will have had a positive time with family, others may have had negative experiences and could be at increased risk. The Safeguarding Policy has recently been updated, and 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](http://www.childline.org.uk)**
  - **NSPCC**  
Tel: 0808 800 5000 (9-6 Mon-Fri)  
Email: [help@nspcc.org.uk](mailto: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/>**





# 04. 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 the government gives the opportunity 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**.

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 light that 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.

## 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 re-commencing 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 recommended to wear facial coverings to reduce infection risk. Players are not required to wear facial coverings. It is acknowledged that referees may be able to wear a lightweight plastic visor at their own discretion. 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 maybe better as gathering numbers may increase.



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
- Fabric or cloth masks
- Athlete centered face masks

FFP3 masks should be reserved for clinical use by the NHS and stocks preserved for this important work. As the 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 own clinical judgement.

## **BAME COMMUNITIES**

58% of our membership are from Black, Asian, and Minority Ethnic (BAME) communities. There appears to be evidence that 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.

## **TEAM RISK**

- Large gatherings and high numbers within a confined space are likely to increase the risk of infection.
- Small group sessions will reduce the infection risk (up to 6 people during RTP Level 3).
- Once in Level 2, we predict the ability for a full squad training to take place (including coaches and support staff)
- 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.
- Basketball England are not advocating carpooling and public transport is not advised where possible for level 3 and level 2.
- 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.
- 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) that has been infected with COVID-19.
  - 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**.
- **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 – **Risk Information.**

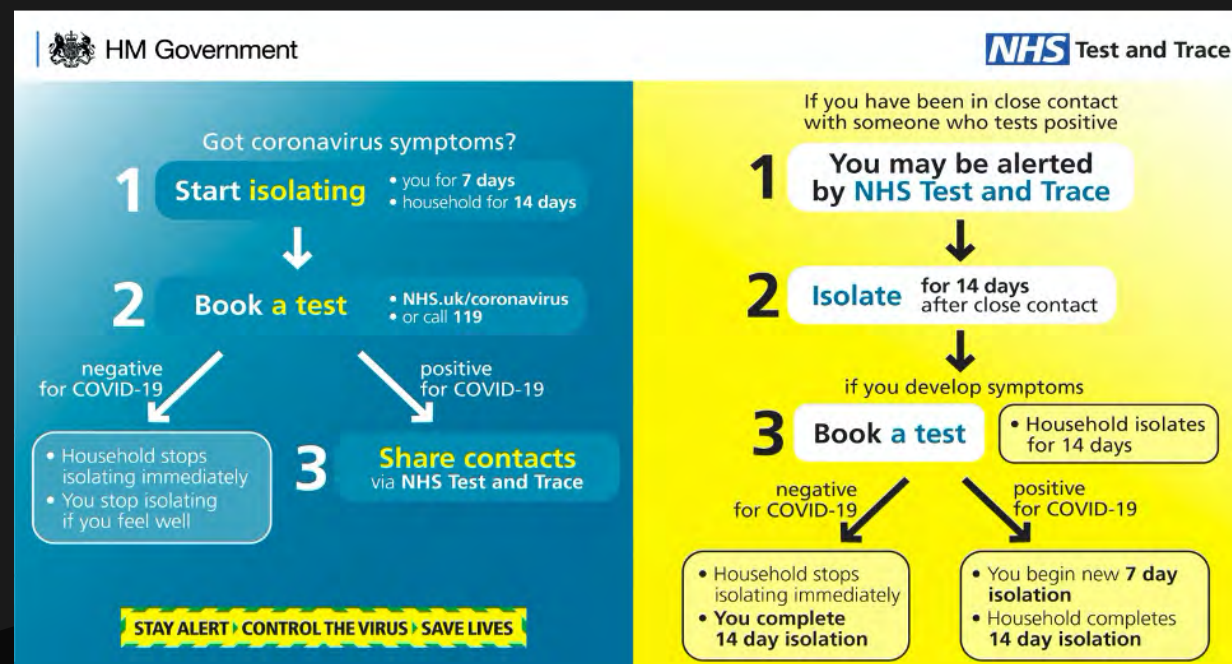
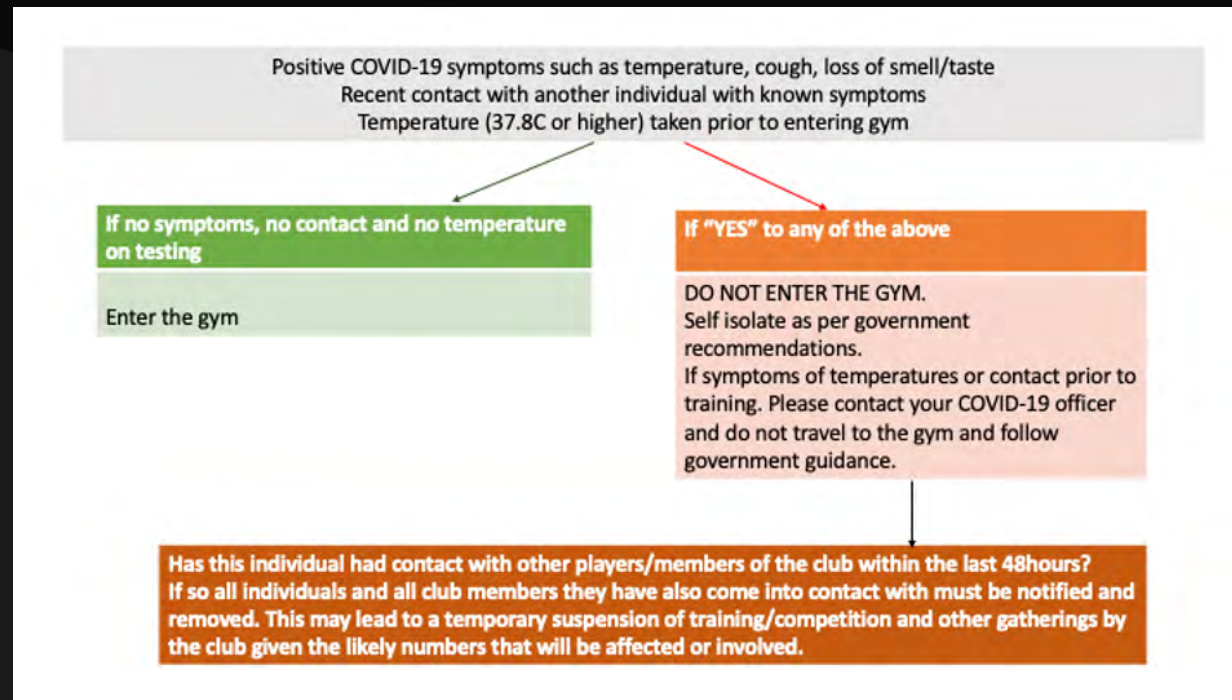
## SCREENING

- To be conducted at RTP levels 3, 2 & 1.
- Screening sheet in **Appendix 3.**
- Ensure screening is conducted in a suitable area away from venue entrances, ensuring good social distancing practices, i.e. far end of car park.
- 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.
- 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. Each nation: England, Scotland, Wales and Northern Ireland, currently have different procedures.
- 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 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 7 days for an individual and 14 days for members of the household.
- The name of the infected individual is not to be disclosed to protect anonymity.
- All attendees of the session should be advised to isolate for 14 days (as per government guidelines) in case symptoms arise.
- COVID-19 Officer should complete the following **COVID-19 INCIDENT REPORTING FORM.**



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 with 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 1 metre of another person'. We believe that 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.

## 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 levels 4 and 3 (currently 1 metre 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 (levels 4 and 3).
- At level 4 and 3, a single ball could be used **ONLY** within a household as long as it is wiped down before and after playing.
- At level 3 within a club environment, everyone has to play with their own ball that has already been disinfected.
- In order to reduce infection risk further we are recommending stopping training and disinfecting the balls every 20min
- 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 and level 3.
- Relaxed social distancing may apply during level 3 with increases in numbers within the training environment but maintenance of 2-metre, and if necessary 1 metre plus distancing rule still in place.

# 06.

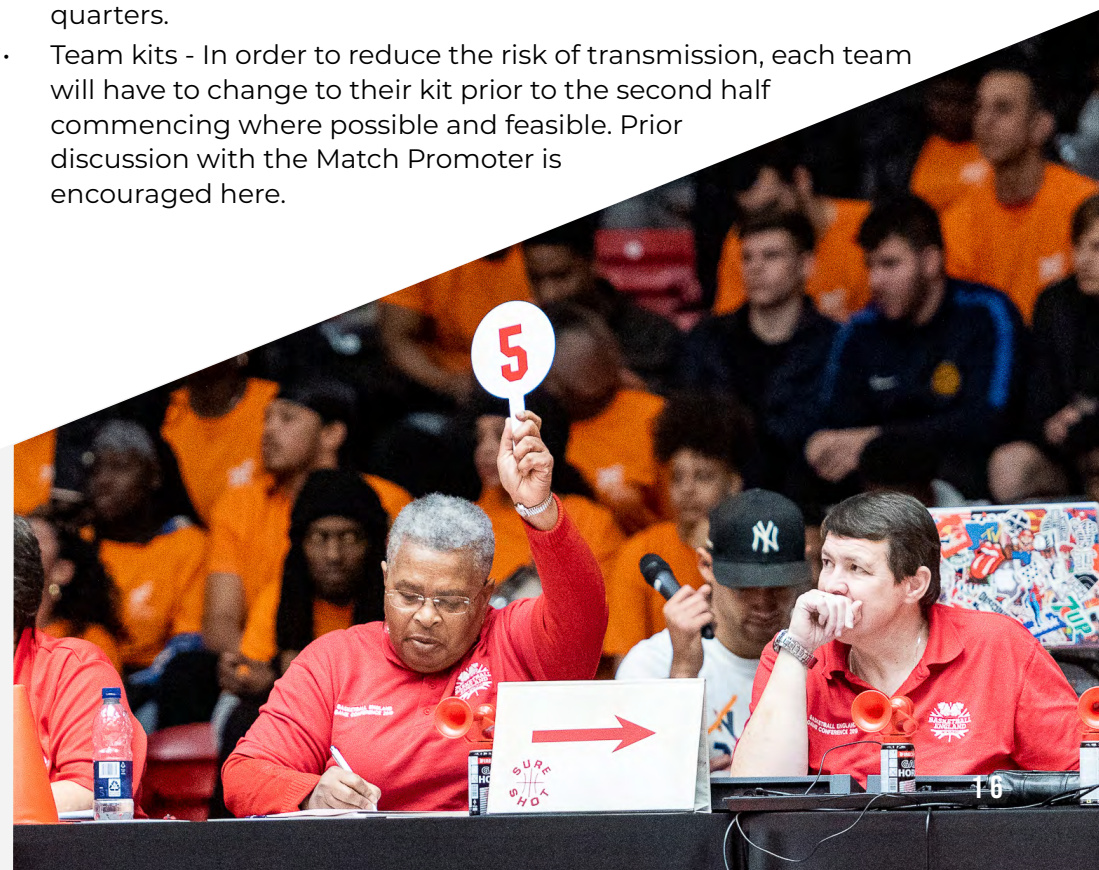
# HYGIENE

# CONSIDERATIONS

- Avoid shouting at all times due to the increased risk of aerosol transmission.
- For level 4 and 3, 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 and 3.
- At level 2, once team practices commence, we recommend wiping balls every 20 minutes.
- 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 strongly recommended. A full face visor could also be considered as a form of mitigation.
- Face covering should be considered by coaches, table officials, statisticians and all other support staff.
- Any staff involved with floor cleaning should wear masks and 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.
- Timeouts will be increased in time length by 30 seconds to 1 minute 30 to accommodate suitable time for hand sanitisation. Every team should conduct their timeout with a minimum of 1 metre 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 timeouts 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.

## COMPETITIVE GAMES

- Only from levels 2 and 1.
- Hand sanitiser (minimum 60% ethanol or 70% isopropanol) is advised:
  - Before and immediately after training
  - 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 and spaced 2 metres apart. If use of bench is the only option, marking 2 metres between each player is necessary.
- The benches can be on opposite sides of the court if feasible.
- Substitutions can occur directly from the bench, no need to go to the score table.
- Avoid shouting at all times due to the increased risk of aerosol transmission.
- Have 2 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).





## REFEREES, TABLE OFFICIALS AND STATISTICIANS - FROM LEVEL 2 ONWARDS

- Arrive in playing kit and do not use the changing rooms.
- It is recommended to arrive at the game in adequate amount of time to perform your duties and to warm up.
- It is not necessary to arrive directly 1 hour prior to tip-off therefore we suggest the Match Promoter contact the officials 1 week from the game to advise on game details, facility logistics and any other information. This will allow the minimal amount of time prior to the game commencing.
- Please enter the court from 20 minutes from tip-off.
- It is recommended that 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 advised to wear a facial covering.
- Referees, Table Officials and Statisticians are strongly recommended to wear face visors and space at least 1 metre apart.
- Referees will have to stop the game if they feel that social distancing or inadequate hygiene regulations are being used.
- 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.
- There will be the following sanctions that could be implemented if the officials deem a team to be breaching the social distancing or hygiene guidance:
  - A warning followed by:
    - In game sanctions: Technical Fouls
    - Club Wide Sanctions: Re-education of the RTP, potentially leading to a club increase in the Basketball RTP Level (for instance from

Level 2 back to Level 3) if that club are unable to adhere to the guidance in this document and they are putting any members of the basketball family at risk.

## 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 2 meters apart.
- Therapist's need to be happy their insurance will cover them to treat individuals in the sport environment.
- The clinician should strongly consider wearing face coverings/masks and eye protection (glasses/goggles) during examination or treatment (close 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 2 metres) 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/media/statements/resuscitation-council-uk-statements-on-covid-19-coronavirus-cpr-and-resuscitation/covid-community/>

## 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 3 – use of indoor courts (if permitted and accessible) but only the club/team training allowed on the court (maximum of 6 individuals).
- Level 2 – Up to 30 individuals on the 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 changeovers.
- 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 1 in, 1 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 currently a maximum of 6 able to gather at any one point.
- 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.

# 07.

# 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 3 - GET IN, GET BETTER, GET OUT

- Clubs Risk assessment completed and logged (**Appendix 2**).
- Follow screening and hygiene guidance set out in this document.
- Social distancing rules continue to apply including a 1 metre plus distance between people.
- Groups of **up to 6 individuals** may gather to train to play basketball (this must include any coaches or staff present) on one court.
- Be mindful that if working with children in a club setting, two adults should be present at all times.
- Outdoor courts.
- Indoor courts are permitted for Government defined **'Elite'** athletes only. This is subject to local guidance on the opening and accessibility of facilities.
- All high contact areas to be wiped down after session (benches, chairs, door handles, strength and conditioning equipment, tables etc.)
- Single ball can be played with, **ONLY** if amongst household.
- Strict distancing must be adhered to throughout the training sessions, therefore no contact drills allowed.
- If working in small groups, make sure those groups remain separate throughout the training session and afterwards, as this will help reduce contact risk. Coaches should implement, document and monitor the groups throughout the session. This will reduce difficulties with NHS Test & Trace if a COVID-19 case is identified.
- During play, go and get your own ball; no rebounding or retrieval of balls by other people.
- No team-based drills to limit contact opportunities .
- No carpooling to courts, limit travel distances/time, observe public transport guidance.
- Training ideas: skill-based movement patterns, foot work, strength and conditioning, shooting form.

## LEVEL 2 - RESTART COMPETITION

- Risk assessment completed and logged (see **Appendix 6**).
- Social distancing rules relaxed, and public gathering numbers increased by the government.
- Follow screening and hygiene guidance set out in this document.
- Full team training allowed with a maximum of 30 people inside a court venue (including coaches, players, support staff and officials).
- Ideally continue to work in small groups at training with that group staying together throughout 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 starting with local, regional and Central Venue Leagues (CVLs), followed by national leagues dependant on the latest government guidance and within public gathering limits.
- 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:
  - 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 6-week 'pre-season' 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 removed.
- Hygiene and screening guidance adhered as set out in this document.

## LEVEL 0 – 'NEW NORMAL'

- Likely to happen only once UK 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 APPROPRIATE TO RETURN TO PREVIOUS LEVELS.**

Further lockdown measures may apply to:

- Clubs
- Regions
- Nationally



# 08. 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.

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 7 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.
- 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 3 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/coronavirusrelated-deathsbyethnicgroupenglandandwales/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-and-recreation/guidance-for-the-public-on-the-phased-return-of-outdoor-sport-and-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-to-wash-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-you-or-someone-you-live-with-has-coronavirus-symptoms/staying-at-home-if-you-or-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, sanitiser, masks etc.** - <https://fit4sportltd.com/>

## VENUE GUIDELINES

**UK Active** - <https://sportengland-production-files.s3.eu-west-2.amazonaws.com/s3fs-public/2020-05/ukactive%20framework%20for%20re-opening%20the%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/coronavirus-and-your-wellbeing/>

**HSENI – Wellbeing at work** - [www.hseni.gov.uk/stress](http://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).
- Responsible 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.
- Responsible for the collection and appropriate storage of screening forms and attendance forms.
- Responsible 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.
- Responsible 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.
- Report 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.

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

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	<p>Signs detailing COVID-19 symptoms at venue/court entrance</p> <p>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</p>	<p>All attendees reminded of the following:</p> <ul style="list-style-type: none"> <li>No bodily contact, including handshakes/high fives</li> <li>Wash hands thoroughly for 20 seconds after going to the toilet and use alcohol-based hand rub</li> <li>Social distancing rules apply – 2 metres</li> <li>No congregating once training or a game has ended</li> </ul>			

WHAT ARE THE RISKS?	WHO MIGHT BE HARMED?	CONTROLS REQUIRED	ADDITIONAL CONTROLS	ACTION BY WHO?	ACTION BY WHEN?	DONE?
<p>Infection being passed directly from person to person</p>	<p>Players, coaches, support staff, members of the public in the facility</p>	<p>Screening should be set up away from building entrances/exits</p> <p>Maximum of 6 participants, including coaches and support staff. Ensure two adults are present at all practices involving under 18s</p> <p>Use of face masks advised for coaches and support staff. Players may use masks but this could restrict breathing</p> <p>Hand sanitiser available at entrances to the building and on courtside – should be applied regularly</p> <p>Suitable hand washing equipment available in toilets and changing rooms</p> <p>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</p> <p>Train outside, if possible. Open any doors that surround an indoor court if possible, to ensure maximum ventilation and reduce aerosol spread</p>	<p>All attendees reminded of the following:</p> <ul style="list-style-type: none"> <li>• No bodily contact, including handshakes/high fives</li> <li>• Wash hands thoroughly for 20 seconds after going to the toilet and use alcohol-based hand rub</li> <li>• Social distancing rules apply – 2 metres</li> <li>• No congregating once training or a game has ended.</li> </ul>			

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: <ul style="list-style-type: none"> <li>Avoid touching high contact surfaces e.g. door handles, benches, chairs.</li> <li>Use hand sanitiser frequently during practice</li> </ul>			
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: <ul style="list-style-type: none"> <li>Not share water bottles, balls or any other equipment</li> <li>All basketballs should be washed or wiped down before and after the session</li> </ul>			
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: <ul style="list-style-type: none"> <li>Always stay 2 meters apart</li> </ul>			

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 1 in, 1 out rule where toilets have restricted access	All attendees reminded to: <ul style="list-style-type: none"> <li>Arrive changed, ready to play</li> <li>Avoid prolonged time in the toilet</li> <li>Avoid showering and changing at venue where possible</li> <li>Wash hands thoroughly for 20 seconds and use an alcohol-based hand gel after going to the toilet</li> </ul>			
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: <ul style="list-style-type: none"> <li>Stay on court</li> </ul>			
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 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 <b>YOU</b> or your <b>HOUSEHOLD</b>
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, <b>severe</b> 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
<i>Have one or more of the underlying health conditions listed below:</i>
<ul style="list-style-type: none"><li>• Chronic (long-term) mild to moderate respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis</li></ul>
<ul style="list-style-type: none"><li>• Chronic heart disease, such as heart failure</li></ul>
<ul style="list-style-type: none"><li>• Chronic kidney disease</li></ul>
<ul style="list-style-type: none"><li>• Chronic liver disease, such as hepatitis</li></ul>
<ul style="list-style-type: none"><li>• Chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), or cerebral palsy</li></ul>
<ul style="list-style-type: none"><li>• Diabetes</li></ul>
<ul style="list-style-type: none"><li>• A weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets</li></ul>
<ul style="list-style-type: none"><li>• Being seriously overweight (a body mass index (BMI) of 40 or above)</li></ul>
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 have 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, or
- 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 clubs.
3. Current England/Great Britain who are aged 16+ (U18, U20 & Senior players).
4. Student athletes on the England Development Programme

For the above-named athletes, a return to indoor training in line with level 3 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/institutions 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.

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

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	<p>Signs detailing COVID-19 symptoms at venue/court entrance.</p> <p>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.</p>	<p>All attendees reminded of the following:</p> <ul style="list-style-type: none"> <li>To lower the frequency of bodily contact, players/teams must have no handshakes, celebrations/high fives.</li> <li>Players reminded not to help one another off the floor, to reduce touching of hands.</li> <li>Player huddles / team talks must allow for social distancing of 1m+.</li> </ul>			

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<p>Infection being passed directly from person to person</p>	<p>Players, coaches, support staff, members of the public in the facility</p>	<p>Screening should be set up away from building entrances/exits.</p> <p>Maximum of 30 people at the venue including players, coaches, support staff &amp; officials. Ensure two adults are present at all practices involving under 18s.</p> <p>Practice in small groups in training whenever possible, with that group working together throughout to reduce risk of transmission.</p> <p>Contact training should be limited to 20 minute intervals.</p> <p>Use of face masks advised for coaches and support staff. Players may use masks, but could restrict breathing.</p> <p>Hand sanitiser available on entrances to building and on courtside – should be applied regularly. Application on arrival, before training, every 20min during training, at the end of training and on leaving the venue.</p> <p>Suitable hand washing equipment available in toilets and changing rooms.</p>	<ul style="list-style-type: none"> <li>• Wash hands thoroughly for 20 seconds after going to the toilet and use alcohol-based hand rub.</li> <li>• Avoid shouting at all times due to the increased risk of aerosol transmission.</li> <li>• Social distancing rules apply if not on the court in a playing capacity.</li> <li>• No congregating once training or game has ended.</li> <li>• Clear signage to ensure a singular flow of people in and out of the venue.</li> </ul>			

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Infection being passed directly from person to person	Players, coaches, support staff, members of the public in the facility	<p>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.</p> <p>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.</p>				
Infected surfaces in the building e.g. door handles, chairs and benches	Players, coaches, support staff	<p>Regular disinfection of heavily used areas and surfaces.</p> <p>COVID-19 bin available to dispose of cleaning equipment.</p> <p>Hand sanitiser available on court and entrance to building. Use separate entrances and exits to the court where possible.</p>	<p>All attendees reminded to;</p> <ul style="list-style-type: none"> <li>• Avoid touching high contact surfaces e.g. door handles, benches, chairs.</li> <li>• Use hand sanitiser frequently during practice</li> </ul>			

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	<p>Players/teams &amp; officials should arrive at the venue in their game attire to avoid using changing rooms.</p> <p>No water bottles should be provided by coaches/clubs. All water bottles named.</p> <p>Team based training and game play is permitted, including the passing of balls between players.</p> <p>COVID-19 bin available to dispose of cleaning equipment.</p>	<p>All attendees reminded of the following:</p> <ul style="list-style-type: none"> <li>• Not share water bottles.</li> <li>• Basketballs should be washed or wiped down before, during (every 20 minutes) and after the session.</li> <li>• Have 2 match balls for games, one can be wiped down as the game continues.</li> <li>• Ball wiping by officials at all major stoppages (at the end of quarters/ time-outs).</li> </ul>			
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	<p>Cleaned regularly.</p> <p>Suitable hand washing equipment available in toilets and changing rooms.</p> <p>Venues should operate a 1 in, 1 out rule when toilets have restricted access.</p> <p>No sharing of towels by players, staff or officials.</p>	<p>All attendees reminded of the following:</p> <ul style="list-style-type: none"> <li>• Arrive changed, ready to play.</li> <li>• Avoid prolonged time in the toilet.</li> <li>• Avoid showering and changing at venue where possible.</li> <li>• Wash hands thoroughly for 20 seconds and use an alcohol-based hand gel after going to the toilet.</li> </ul>			

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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 unless group number is less than 30 and social distancing can be adhered to. 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; <ul style="list-style-type: none"> <li>• Stay on court</li> <li>• Hand sanitise regularly</li> </ul>			
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.			

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Social distancing not being adhered 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		
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

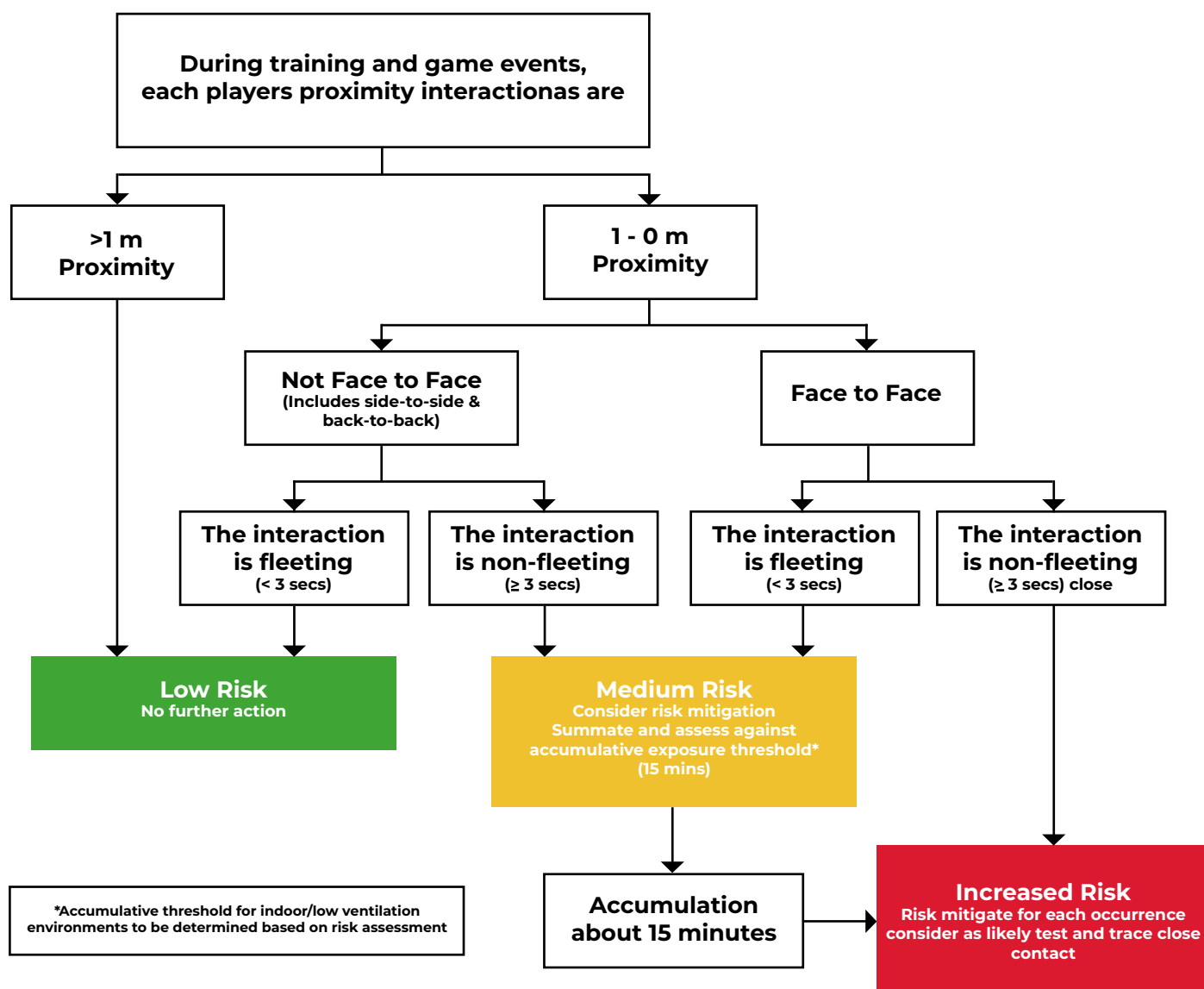
As we move from Level 3 to Level 2 in our Return To Play (RTP) Roadmap we will be reintroducing team based training and competitive basketball.

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 5 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 dependant 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 be increased in duration from 1 minute to 1 minute 30 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 only safe way to undertake this is to conduct the timeouts on the half of the court opposite their team bench. All players will be required to use hand sanitiser at this point as well.

The added duration for the timeout will also allow for the officials 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 accidentally 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.

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