



RETURN TO BASKETBALL

FIBA COVID-19 RESTART GUIDELINES FOR NATIONAL FEDERATIONS

Introduction

This document is an overview of the available information on COVID-19 coronavirus but information about the virus is changing all the time. Therefore, it is important to regularly review the latest information about COVID-19. Much of the information presented here is available on many international public health websites and, in particular, the World Health Organization (WHO) website.

This document is primarily for use by National Basketball Federations who are looking for guidance in the restart of basketball in their jurisdiction, particularly if there is a lack of Government oversight on the management of the COVID-19 virus in sport.

General information

The Novel Coronavirus or 2019-nCoV (COVID-19) is a new virus first identified in early December 2019 in Wuhan, China. From the first cases it has now infected almost 5 million individuals and caused death in nearly 350,000 in a 5-month period. The impact on world human activity has been devastating, including the suspension of international and domestic sport.

The virus belongs to the corona family of viruses which includes MERS and SARS both of which have had devastating health outcomes in the past. While COVID-19 does not appear to have the same mortality rate, it is more infectious and causes significant illness to the lungs, heart, brain, bowel, kidneys, immune system and other organs. Medical science is learning something new about the damage COVID-19 causes every week.

There is currently no treatment for COVID-19 and the only reasonable current strategy is to control its' spread, to flatten the incidence, to assist the health care effort and buy time while scientist work towards a vaccine.

Suspension of competitions

In early March FIBA was one of the first international federations to have suspended all its international competitions.

The NBA and many other professional Leagues have also suspended their competitions.

Many domestic competitions have been suspended following government directions.

All these efforts have been put in place to contain the damage done by COVID-19 and help contain its' spread.



Competition restart

FIBA is now working towards a restart of basketball competitions in support of professional Leagues and National Competitions. Due to the risks associated with COVID-19, this is a slow and careful process that needs to be well planned.

Most National Federations will restart by following guidance and the lifting of restrictions by their governments and public health authorities.

Restart Guidance for National Federations

This information is intended for National Federations and is not intended to replace the guidance and restrictions of governments and public health authorities.

Key questions to ask before a restart

- What are the local government and public health authority guidance and restrictions and how will they impact the smooth running of a basketball competition?
- What is the COVID-19 prevalence in the community and is it safe to restart?
- Is the community coping with the medical complications of the COVID-19 Pandemic?
- Is travel safe and permitted, both domestic and international?

Guidelines for a restart

In general, it must be recognized that a phased approach to the restart process is essential. In the initial phase individual player-training opportunities should be made available with minimal coaching support. Subsequently small groups of players, with careful attention to distancing and allocation of specific training areas may begin (“one player - one basket – one coach”) training. In the final phase team training may commence but, in a setting, strictly limited to essential team officials. Thereafter, when public authorities have granted permission for sport activities to begin, more conventional approaches to training and competition may commence – it must be recognized that public authorities will most likely restrict gatherings of large numbers of individuals and therefore spectator attendance may be prohibited as competitions commence. Federations should also anticipate that there may be an unwillingness on the part of many to participate in events in settings where crowds are anticipated. In any event, as spectator access is allowed by public authorities it is reasonable to anticipate that there will be specific expectations regarding social-distancing in spectator areas as well as very specific approaches to regulating entry and exit, monitoring and regulation of crowd activity, and a limitation on the use of other than essential venue facilities. Federations should be aware that the management of spectators may require specific venue staff training.

Varying national or regional approaches to the gradual resumption of normal activities post-COVID-19 are inevitable – they will have obvious implications for competition and travel.

This list of actions is not exhaustive nor necessarily mandatory but can serve as a checklist to ensure the best chance of a successful start-up. Above all, the planning group should be aware that at any stage, the restart-up may be required to stop, due to emerging COVID-19 infection issues in the sport, venue or wider community. A clear understanding of the circumstances for a suspension of basketball needs to be considered and prepared for.



More specific requirements and recommendations follow:

Initial preparation

1. Form a restart oversight committee (include CEO or delegate, head of competitions, infectious diseases physician, sports medicine physician, project manager, government liaison, media, etc.).
2. Undertake a full risk and mitigation assessment (see references, particularly the WHO Risk Assessment for Basketball).
3. Develop a restart plan with wide sport consultation and include a benchmarking exercise by reviewing similar team sports or other basketball organisations.
4. Liaise with the local government and public health authorities for eventual sign-off.
5. Implement the plan but have an exit strategy if directed by government or public health authorities.

Potential action checklist

- A. Whole of National Federation basketball plan (multiple venues and competitions)
 - Overall plan and look for the country
 - Local venue plans to flow from the national plan
 - Awareness and education for players and coaches
- B. Basketball venue and facilities
 - Large venues or competitions should have a Restart Steering Committee for planning and implementation meetings to assess progress
 - A risk assessment and plan should be developed for each venue
 - Undertake a risk assessment of venue operational personnel
 - Develop Go/No-Go decision modelling
 - Assess the venue ventilation to determine attendee and spectator level safety – aerosol spread risk
 - Entrance control and signage (mandatory denial for acute viral illness and fever, warning for ‘at risk’ participants, head count control, venue closure policy, hand sanitisers).
 - Participant movement planning such as corridor direction markings, separate entry and exit points
 - Limit facilities access (canteen, toilets, change rooms, showers, basketball officials’ rooms, store).
 - Social distancing guidance such as entrance marking, crowd spacing guidelines, head count management, limitations to access, guidelines for seating
 - Cleaning plan
 - Biosafety oversight, operational and compliance plan
- C. Medical support
 - Contribution to the planning and oversight committee
 - Provision of ongoing treatment to players using ‘best practice’ approaches to clinical care including limiting access to clinic room, social distancing, mandatory use of PPE by all clinicians, fastidious approach to cleaning and disinfection
 - Health clearance and surveillance of players and team officials
 - Development of medical emergency scenarios and responses such as a confirmed COVID-19 case or non-specific acute viral illness
 - Access to emergency PPE and medical support
- D. Travel and accommodation (if applicable)
 - Plan this carefully
 - Biosafety considerations (small groups, hygiene, spectator access)
 - Avoidance of crowds



- Vehicle preparation such as seating arrangements and sanitisation (air and road)
 - Single rooms for each individual (where feasible)
 - Ensure a room is available for isolation should symptoms emerge while travelling
 - Food and fluids hygiene management
- E. Testing for COVID-19 (if applicable)
- Regular health monitoring
 - Symptom and temperature checks at entrance to a stadium
 - PCR testing in professional Leagues
 - Assess the value of antibody tests with experts
 - Consider Antigen/ELISA tests once available
- F. Restart preparation of players and teams
- Allow 3-6 weeks of training prior to the restart
 - Start with individual training to small groups to full team training
 - Advice to players regarding access to facilities and biosafety preparation of facilities prior to commencement of use
 - Team training times and controls to support a safe environment
 - Players shower before and after scrimmage sessions – it is preferable that players shower and change into clean clothing at home away from the training or game venue
- G. Education
- Biosafety officials need specific training
 - Roles of other event officials (Referees, Coaches, bench Officials, game commissioners)
 - COVID-19 prevention for all participants
 - Resources to support the education such as handouts and online information (refer to Appendices 1 and 2)
 - Notices at the venue entrance and courtside
- H. Biosafety actions
- Stadium attendee control to ensure compliance to government restrictions
 - Social distancing guidance such as head count, corridor lanes and organised spaced seating
 - Spilt operational personnel and Officials into teams
 - Reinforce personal hygiene such as hand washing, hand sanitisers, pre- and post-participation showers and change and personal protective gear
 - Facilitate fresh air flow through the venue such as open windows and fans
 - Management of the ball (rotation and sanitisation system).
 - Cleaning of the entire venue with particular attention to high traffic areas, entry points, official's bench, players' bench and the court
 - Careful timing of participant access (immediately exit a court post-game, entry to court when empty, waiting/marshalling area)
 - Medical waste management
 - Notices reinforcing safety messages
 - Oversight and compliance assurance, e.g. mandated biosafety and cleaning checklists
- I. Spectators (if allowed and safe)
- Spectator access and start-up



- Assess attendee limits (review government restrictions, court capacity, social distancing controls, ventilation, seating limits)
 - Head count systems for whole on venue
 - Management of non-compliance (security)
- J. Management of at-risk individuals
- Warnings at entry (>65 years, chronic illness, immune-compromised)
 - Mandatory non-entrance assurance (acute viral illness symptoms, temperature checks)
- K. Communication and stakeholder strategy
- Regular communication with government and public health authorities
 - Map all stakeholders
 - Awareness of COVID-19 for all active participants
 - Training of newly appointed biosafety officials
 - Volunteers
 - Teams
- L. Teams
- Awareness and education training
 - Risk assessment of individuals for active COVID-19 infection or infection vulnerability
 - Supporting resources and signage

Appendices: Examples of Supporting Resources

1. Information about COVID-19
2. Information for basketball coaches and players
3. Special risk mitigation considerations for 3x3 event organisers
4. Decision making framework for National team international travel
5. References and Links
6. Risk Assessment and Mitigation for Basketball



Appendix 1. Information about COVID-19

Who is susceptible?

All populations who have not been previously exposed to COVID-19 are susceptible. The elderly, obese and those with significant chronic disease (e.g. hypertension, heart, respiratory, cancer, kidney, liver, diabetes, immunocompromised, etc.) are particularly vulnerable to the devastating complications that can follow an infection. Children and the young do not appear to be as vulnerable, but complications are also recorded in these age groups.

How does COVID-19 spread?

People can catch COVID-19 from others who have the virus. The disease can spread from person to person through small droplets from the nose or mouth which are spread when a person with COVID-19 coughs or exhales. These droplets then land on nearby objects and surfaces. Other individuals become infected with the COVID-19 virus by touching these objects or surfaces and then contacting their eyes, nose or mouth. People also appear to catch the virus by inhaling these droplets from close contact with an infectious individual, particularly when in a confined space.

Many individuals with COVID-19 experience only mild symptoms or none at all. This is particularly true at the early stages of the disease and in the young. It is therefore possible to catch COVID-19 from someone who has, for example, just a mild cough and does not feel ill. This is another reason why the virus is so insidious and risky.

Symptoms

The most common symptoms of COVID-19 are fever, tiredness and cough. Some patients may have aches and pains, nasal congestion, sore throat, breathlessness, loss of smell and diarrhoea. These symptoms are usually mild and begin gradually.

About 80% recover from the COVID-19 infection without needing special treatment. However, approximately 1 out of every 6 people become seriously ill, usually with breathing difficulties. Older individuals and those with underlying medical problems like high blood pressure, heart problems or diabetes, are more likely to develop serious illness. In the current COVID-19 pandemic anyone with fever, cough and difficulty breathing should seek medical attention.

Infection prevention

Be aware of the latest information on the COVID-19 outbreak which is available on the WHO website and through your national and local public health authorities.

It is more than likely your local government will have provided specific instructions on how to prevent the infection. This is likely to include a restriction of the gathering of groups of individuals, the maintenance of social distancing, widespread testing for the virus, tracking of case contacts, restrictions for schools, work and sport. It is essential that everyone follow the guidance provided by their own government.

The other means of preventing infection is to follow basic personal hygiene:

- Regularly and thoroughly wash your hands with soap and water for 20 seconds (kills the virus)
- Augment this with an alcohol-based hand sanitiser (kills the virus)
- Maintain at least 1.5m distance between yourself and anyone else and further if they are coughing or sneezing (avoids contact)
- Avoid touching eyes, nose and mouth (avoids virus entry to the body)



- Follow good respiratory hygiene - covering your mouth and nose with your bent elbow or tissue when you cough, or sneeze followed by its disposal (reduces spread to others)
- Stay home if you feel unwell (e.g. fever, cough, sore throat or difficulty breathing) and call for medical advice (early isolation will limit the spread)
- Keep up to date on the latest COVID-19 hotspots (cities or local areas where COVID-19 is spreading widely)
- Avoid travel if there is significant community prevalence (high risk of exposure to COVID-19) and
- Avoid international travel (high risk prevalence for COVID-19)

There is currently no vaccine for the prevention of COVID-19.

Should I wear a mask to protect myself?

Only wear a mask if you are ill with COVID-19 symptoms (especially if you have a cough or looking after someone who may have COVID-19) or are instructed to do so by government or a medical professional.

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Appendix 2. Information for basketball coaches and players

Do not attend training or games if you are unwell

- Be aware of the symptoms of COVID-19 infection
- Notify your doctor if you are unwell
- Do not return to team activities until cleared by a doctor

Avoid close contact

- Travel in your own vehicle to and from the basketball venue
- Maintain social distancing (1.5m) when not training or playing (e.g. no autographs or selfies, control of media)
- Maintain social distancing on the bench
- No unnecessary physical contact such as hugs, handshakes, high fives or fan engagement
- No unnecessary physical contact with an opposition team, referees or match officials
- Utilise your own towel and drink bottle
- Shower with soap and change immediately before and after training or play to reduce contact risk
- Use hand sanitisers regularly but particularly at substitutions and breaks
- Use hand sanitisers and clean the equipment after every use when in the weight room

Team

- Conduct awareness and education regarding COVID-19 and its prevention
- Only necessary individuals should be with the team
- Train in small groups
- Regular cleaning of team facilities
- Rotation and sanitisation of basketballs
- Train in a well-ventilated venue
- Monitor the hygiene practices of individuals in the team
- Medical monitoring for illness and fever
- Consider regular COVID-19 testing

Travel

- Have a biosafety plan for travel
- Manage vehicle transport including air travel (masks, sanitisation of seats, personal hand sanitisers, individual food and drink, avoidance of crowds)
- Single rooms and ensure room available for isolation should symptoms emerge while travelling
- Careful selection of freshly cooked food



Appendix 3. Special risk mitigation considerations for 3x3 event organisers

This risk mitigation guidance is specific recommendations that are further extended to 3x3 events' operational aspects that are not included as a general guidance in this document.

- Venue biosafety plan
- Spectator access and seating controls
- Health surveillance of participants
- Specialist medical backup
- Avoid having players' change and shower facilities onsite
- Make team presentation static (e.g. one picture per team for TV)
- Planned social distancing for media interface with participants
- Minimise close contact:
 - Teams to wait to enter the court in the opposite corners
 - No handshake and no high-five between teams, referees, table officials, etc.
 - Players substitution seats to have bigger and minimum physical distancing (from each other and from the official table)
 - During time-out teams to move to dedicated area
 - Players area to have dedicated space per team and to have distance between each other



Appendix 4. Decision making framework for National team international travel

Any consideration for travel should include consultation with the government health agencies and an assessment of the destination health and safety risks. Given that COVID-19 has been labelled as a pandemic and circumstances are rapidly evolving with information changing daily, the World Health Organization website should also be consulted.

The issues around COVID-19 are complex and create difficulty when planning international travel. Apart from issues of health, sporting organisations need to consider factors such as medical support, infection spread trends, travel restrictions to the initial destination and the possibility that spending time in the initial destination may restrict opportunities to travel to secondary destinations.

This framework is not intended to be an exhaustive or prescriptive decision-making tool. It is intended to highlight the specific needs and challenges for teams who are considering international travel to destinations of elevated risk of COVID-19, without formal travel restriction.

Is it safe?

Once travel restrictions have been removed, the decision for a sporting team to travel internationally should be made on a case-by-case basis carefully balancing the benefits, risks and risk mitigation options.

A framework to assist National Federations and National teams work through their options should include the following considerations:

Benefits

- Why is the team travelling?
- What is the specific aim of the training camp or competition?
- Is the travel optional or mandatory according to the applicable regulations?
- Are there any suitable lower risk locations or events available that can provide the same or similar benefit?
- What is lost by not travelling to an 'elevated-risk' location?

Risks

- How many people are in the travelling group and how long will they be together?
- What are the current known risks and travel recommendations?
- Could this suddenly change?
- Are there likely to be updates to the current travel recommendations?
- How capable is the destination medical system?
- Is a doctor travelling with the team?
- What if someone gets sick?
- What are the implications of a travel shutdown if outbreaks occur?
- Are members of the team minors?



Risk mitigation strategies

- Personal hygiene and awareness education
- Travel biosafety strategy and vaccinations
- Single room accommodation where possible (and ensure availability of an isolation room)
- Reduce the size of the touring group/team and have a team doctor
- Access to medical support (team doctor), specialist medicine and equipment locally
- Actively monitor the health of each member of the team (including temperature checks)
- Travel insurance should cover medical treatment, evacuation and cancellation of trip
- Action plan for an acute viral illness and COVID-19 exclusion and evacuation
- Infection prevention for medical and physical therapy interventions

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Appendix 5.

References

WHO COVID-19 Pandemic information

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

Australian Institute of Sport COVID-19 information

https://ais.gov.au/health-wellbeing/covid-19#covid-19_and_sport_faq

European Center for Disease Prevention and Control (ECDC) cleaning information

<https://www.ecdc.europa.eu/sites/default/files/documents/coronavirus-SARS-CoV-2-guidance-environmental-cleaning-non-healthcare-facilities.pdf>

Links

WHO

<https://www.who.int/news-room/q-a-detail/q-a-coronaviruses>

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

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/travel-advice>

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

Centres for Disease Control and Prevention (CDC)

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

ECDC

<https://www.ecdc.europa.eu/en/all-topics-ztravellers-health/infectious-diseases-aircraft>



Appendix 6. Risk Assessment and Mitigation Checklist for Basketball

<http://fiba.basketball/documents/risk-assessment-mitigation-checklist>

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