2020/2021



COVID-19 SCREENING

INCLUDES QUESTIONS AND ANSWERS ALONG WITH PROTOCOLS

Todd Schmidt

Introduction

We at Stratford Minor Hockey Association have been working hard behind the scenes with our Covid-19 committee to evaluate, assess and develop a plan to prioritize the return to hockey. Our main priority is the health and safety of our players, and coaches. We have developed a plan to help eliminate the possibility of Covid-19 entering our hockey teams and that includes temperature screening and a questionnaire prior to each ice time.

We ask that you as parents be honest and monitor your children’s health accordingly. If they exhibit symptoms of flu, colds, or potentially Covid-19, please keep them home. If they have any symptom, please check their temperature and do not bring them if a fever exists as they will be turned away at the door anyway. Coaches have the ability and obligation to turn away any player who arrives unfit for sport.

The screening questionnaire will be sent to you from a member of your age groups’ coaching staff every ice time. These are monitored by SMHA and that appointed person per age group to ensure they are filled out prior to any player entering the arena. The questionnaire is to be sent out the day of the ice time unless it is an early morning practice, in which case late the night prior will work. This is mandatory to be received before that player is able to go on the ice, each ice time.

Again, our main focus is the health and safety of our players and coaches for the return to play phase of Hockey.

Sincerely your Covid-19 committee, SMHA Executive, and board of directors

STRATFORD MINOR HOCKEY ASSOCIATION (SMHA)

RETURN TO HOCKEY PROTOCOLS AND PLANNING

* **SMHA WILL ADHERE TO ALL FEDERAL, PROVINCIAL, MUNICIPAL, AND LOCAL HEALTH UNIT REQUIREMENTS AND GUIDELINES. THESE WILL INCLUDE THE FOLLOWING AS OF AUGUST 22, 2020**:
  + Social distancing inside and outside the arena
  + Adhere to the 50-person maximum in each indoor space, this number is to include allotted staff for other businesses and city staff inside the facility.
  + Face coverings must be worn by everyone entering the arena as required by the counties of Huron-Perth
  + Players will keep their masks on at all time until they are ready to put their helmet on just before their allotted ice time. It will be required again as soon as their helmet is taken off following their ice time.
  + Social distancing inside the dressing rooms-Players are to be staggered for separation and this will be enforced by the coaching staff.
  + Players are to come partially dressed to limit time inside the arena and due to time constraints. Only skates, gloves, and helmet are to be put on inside dressing rooms.
  + Players will only be allowed inside the arena 15 prior to their allotted ice time
  + Players, parents, coaches will have to vacate the arena within 10 minutes following their scheduled ice time.
  + Coaches, managers, trainers are to wear masks and gloves on the bench at all times.
  + Coaches will ensure that the screening questionnaire is answered and submitted prior to any player being permitted to enter the arena. This will be tracked through google forms. (see attached)
  + Every player must have their own water bottle with their name clearly marked on it. No sharing of water bottles or team bottles is permitted.
  + No food or drinks are allowed inside dressing rooms.
* **IN ADDITION TO THE ABOVE LISTED ITEMS, SMHA WILL PROVIDE THE FOLLOWING ADDITIONAL STEPS TO ENSURE COMPLIANCE AND SAFETY FOR EVERYONE INVOLVED**:
  + Front door screening including non contact thermometer readings as each person enters.
  + Compiling a list of attendees at each allotted ice time including, players, parents and coaches.
  + Hand sanitizing including entering and exiting the facility.
* **IN CASE OF A FEVER, SICKNESS, OR COVID 19 SYMPTOMS**
  + Players, parents, or coaches will not be allowed to enter and will be required to obtain and provide a doctors note before they are allowed to re-attend.
  + All doctors’ notes received must be sent to the COVID 19 committee as they are received. Scan and email to tntgroupinc@rogers.com.
* **IF COVID 19 IS FOUND.**
  + **You will immediately notify your convenor who will advise t**he SMHA COVID 19 committee Todd Schmidt 519-801-0246, or Chris Traynor 519-272-6465. This includes any suspected cases.
  + The local health unit will be notified and collectively we will work together, following their recommendations and guidelines.
  + The player, coach, or parent cannot return without a doctor note and clearance from our local Huron Perth health unit.
* **INFORMATION/EDUCATION**
  + All information, protocols, updates, and other pertinent information will be posted on the SMHA website, social media platforms and will be email blasted to all current coaching staffs so that they can forward it to their user groups.
* **RESPONSIBILITIES**
  + It is the players responsibility to ensure they have the proper safety equipment (mask) and are in good health to attend.
  + Parents are asked to keep their child home if they are sick and ensure they and their child have proper PPE (masks), and should include sanitizer in their hockey bags.
  + Coaches are to ensure that everyone entering during their scheduled ice time is fit for practice, has filled out the questionnaire with all “N” answers and have passed the temperature screening.
  + **NOTE: It is your obligation and authority to turn away any player whom you feel is not fit for ice time. This may include cases without a fever.**
* **Temperature screening information:**
  + **Normal temperature:** 97.9-100.1 degrees Fahrenheit or 36.6-37.8 degrees Celsius
  + **Indication of a Fever:** 100.1 degrees Fahrenheit or 37.8 degrees Celsius
  + **Cut off point:** **100.4 degrees Fahrenheit.** At 100.4-degree Fahrenheit is an absolute **“do not enter”**
  + **NOTE:** If a 100.1-100.4 is detected, take another reading a few minutes later.

**QUESTIONNAIRE**

**Q1**: Have you travelled outside of Canada in the last 14 days? Y/N

**Q2**: Have you noticed any change in your health during

the last 48 hours?

Y/N

**Q3**: Have you had close contact with anyone who has a respiratory illness or a confirmed case of COVID-19?

Y/N

**Q4**: Have you been sick to your stomach in the last 48 hours?

Y/N

**Q5**: Have you experienced a dry cough or shortness of breath?

Y/N

**Q6**: Have you had a fever in the last 48 hours?

Y/N