



# **Standard Operating Procedure (SOP) for getting SAI Training Centres and NCOEs ready after COVID-19 Lockdown**

**Sports Authority of India (SAI)**

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**DISCLAIMER:** This Standard Operating Procedure (SOP) was developed based on secondary research of public domain information from credible media reports and official disclosures by various international sports bodies and advisories by the Government, to provide guidance to trainees and staff at SAI and Non-SAI Training Centres in performing the activities defined herein, in a consistent and standardized manner. Attempts were also made to seek inputs from concerned sports officials managing SAI Training Centres. SAI has made every attempt to present the information in a clear and concise manner for a variety of users. However, SAI is not responsible for the misuse or misinterpretation of the information presented herein. Under no circumstances shall SAI be liable for any actions taken or omissions made by non-SAI users of this document. In general, this document should be used as a guidelines. Differences may exist between the procedures referenced in this document and what is appropriate under site-specific conditions. This document does not represent an endorsement of practitioners or products mentioned in the document. The situation surrounding COVID-19 is dynamic and rapidly evolving. Although extensive secondary research has been conducted to produce this document, but this document is not intended to be legal, medical or expert advice and should not be used in place of consultation with appropriate professionals. The information contained in this document should not be considered exhaustive and the user should seek the advice of appropriate professionals wherever relevant.

## 1. Introduction

The COVID-19 pandemic has thrown the sporting world into unprecedented turmoil, with sports events being cancelled and postponed all around the world and forcing most athletes to cut their training short to enter isolation mode. The pandemic hit the world hard at a time when the Olympic qualifiers for several sports were ongoing and several other sports had already wrapped up their qualifying process, leaving athletes in a conundrum. In response to the global pandemic, the Tokyo 2020 Olympic Games have been postponed to Jul-Aug 2021.

The postponement of the Games has resulted into an unusual situation of underlying opportunity and threat, wherein few athletes might get more time to prepare but at the same time, it could drastically impact the athletes who were already performing at their peak. Hence, it is imperative to find avenues for the athletes to resume training at the earliest to make up for the lost ground during lockdown, in a bid to attain peak performance levels for Olympic Games or its qualifiers. Several countries have already taken strides towards developing an environment for their athletes to resume training and India too should match those strides to be competitive on and off the pitch.

Any further delay caused in resuming the training could put our athletes in a position of disadvantage compared to their global counterparts. Having said so, it is critical to put in place adequate measures to provide a safe training environment for the athletes. To serve this need, this SOP is prepared to set forth guidelines and measures which all training centres should adhere in order to resume training in their premises.

### What is COVID-19?

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus. The virus causes mild to moderate respiratory illness in most people who then recover without requiring special treatment. However, older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness. The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes.

The most common symptoms of COVID-19 are fever, dry cough and tiredness. However, severe symptoms may include difficulty in breathing or shortness of breath, chest pain or pressure and loss of speech or movement.<sup>1</sup>

The COVID-19 virus may persist on any surface for a few hours or several days. Hence, care must be taken at all times, at every place, without exception.

**Status of Covid-19 in INDIA (as on 10-05-2020, 14:26 hrs)<sup>2</sup>**

Total Confirmed Cases	Active Cases	Recovered	Deaths
62938	41472	19357	2109

## 2. Principles for the resumption of sport and recreation activities

- ▶ Resumption of sport and recreation activities should not compromise the health of individuals or the community.
- ▶ Resumption of sport and recreation activities will be based on objective health information to ensure they are conducted safely and do not risk increased COVID-19 local transmission rates.
- ▶ All decisions about resumption of sport and recreation activities must take place with careful reference to these National Principles following close consultation with MoHFW and/or Local Public Health Authorities, as relevant.
- ▶ All individuals who participate in, and contribute to, sport and recreation will be considered in resumption plans, including those at the high performance/professional level, those at the community competitive level, and those who wish to enjoy passive (non-contact) individual sports and recreation.
- ▶ Resumption of other sporting activity should take place in a staged fashion with an initial phase of small group (<10) activities in a non-contact fashion, prior to moving on to a subsequent phase of large group (>10) activities including full contact training/competition in sport. Individual jurisdictions will determine progression through these phases, taking account of local epidemiology, risk mitigation strategies and public health capability.
- ▶ At all times sport and recreation organisations must respond to the directives of Public Health Authorities. Localised outbreaks may require sporting organisations to again restrict activity and those organisations must be ready to respond accordingly. The detection of a positive COVID-19 case in a sporting or recreation club or organisation will result in a standard public health response, which could include quarantine of a whole team or large group, and close contacts, for the required period.

<sup>1</sup>World Health Organisation website

<sup>2</sup>Ministry of Health and Family Welfare website

### 3. Scope and Coverage

This SOP applies to all SAI and non-SAI training centres wherein athletes may undertake training. Resumption of training shall be allowed in a phased manner as per Government guidelines.

This SOP covers all stakeholders active at the centres including –

- ▶ All athletes
- ▶ All technical and non-technical support staff
- ▶ All SAI administrative staff
- ▶ All hostel and facility management staff
- ▶ All visitors to the centres

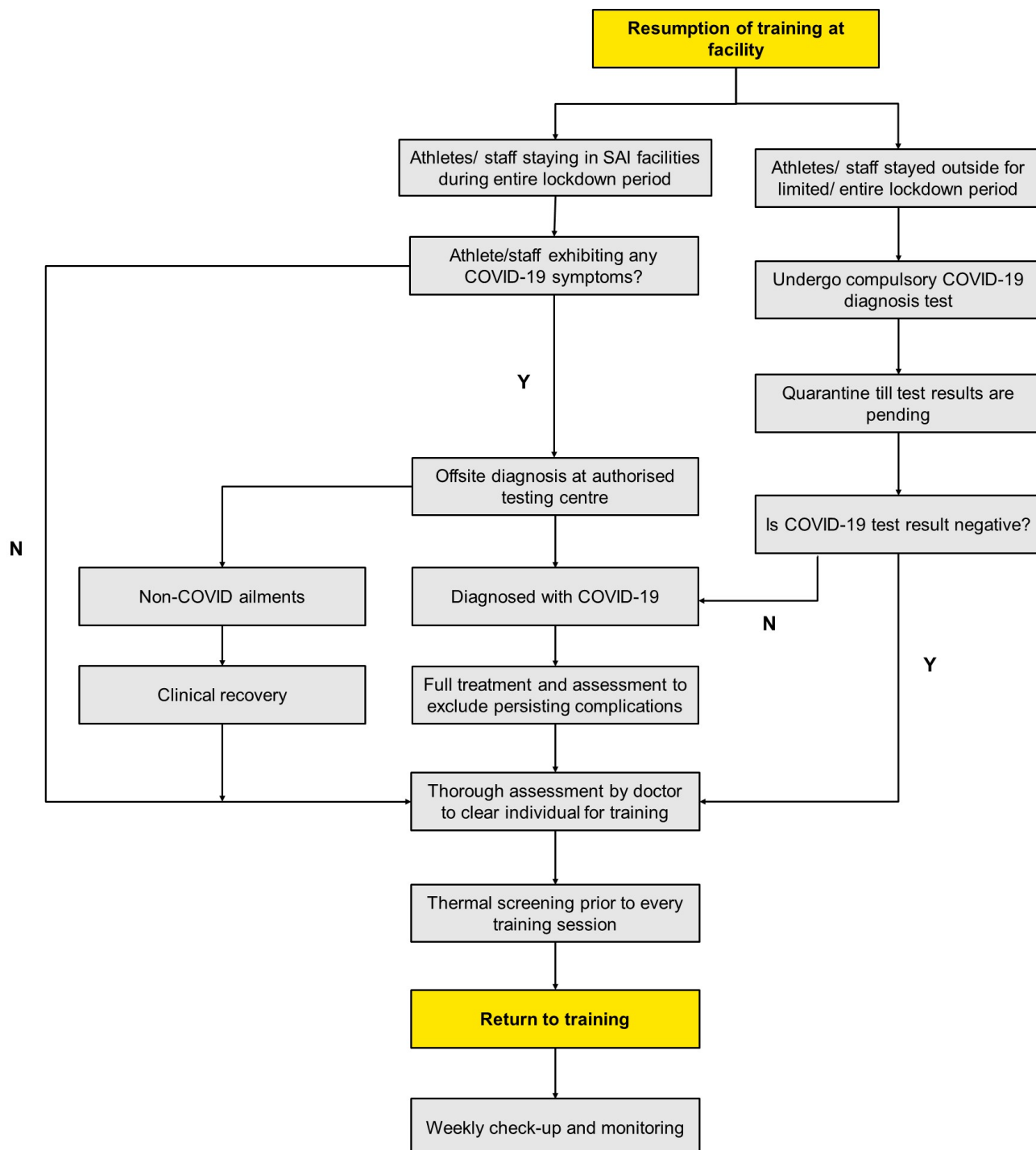
A nationwide lockdown had been announced from 25<sup>th</sup> March 2020 under which there were complete restrictions on movement of individuals. Thus, people were stranded at their immediate location resulting in creation of various scenarios with respect to the status of athletes and staff during lockdown. A concerted effort has been made to ensure all possible scenarios are covered under the ambit of this SOP.

After careful assessment, it was concluded that the Indian athletes/staff striving for resumption of training could be covered under three scenarios. The scenarios and the respective preliminary precautionary measures for each scenario are given below –

Scenario	Precautionary measure
<b>Scenario 1 -</b> Athletes/ staff staying in a contained environment at SAI facilities during the entire lockdown period, with an embargo against ingress and egress of personnel to the facilities.	Athletes and staff shall be subjected to basic screening to detect any concerning ailments. Screening and check-up should be verified by the Doctor-in-charge at the respective SAI centre.
<b>Scenario 2 –</b> Athletes/ staff stayed outside the SAI facilities for limited time during entire lockdown period	All the athletes joining the training facilities afresh shall be tested for COVID-19 to prevent any chance of infection to the personnel who have been staying in an infection free environment at the training facilities. The returning athletes shall be quarantined till the test results clear them of COVID-19 contraction. Final clearance should be provided by the Doctor-In-charge at the respective SAI centre.
<b>Scenario 3 –</b> Athletes/ staff at non-SAI training facilities E.g. Padukone-Dravid Centre for Sports Excellence, Pullela Gopichand Badminton Academy etc.	The precautionary measures of Scenario 1 and 2 will be applicable to all athletes/ staff at all non-SAI training centres

## 4. Flowchart for resumption of operations

The following flowchart illustrates the key steps and considerations for resumption of training at the centres and applies to all the scenarios mentioned in Section 2 of this SOP document.



## 5. Measures to be implemented prior to resumption of operations

### 5.1. COVID Task Force

- ▶ Identify and assign a COVID Task Force at each training centre to guide and monitor all trainees and staff within the centres. The Task Force shall include the chief coaching staff from each NSF as its member. The Centre-in-charge is the ex-officio Chairman of the Task Force and is responsible for overall implementation of protocols outlined in this SOP.
- ▶ Their responsibilities would be including but not limited to –
  - a. Supervision of security arrangements at the entry points
  - b. Monitoring of entry into the campus/playing areas
  - c. Monitoring of drop point for daily supplies
  - d. Monitoring of group movements of athletes/visitors/staff
  - e. Placement of notices/advisories in time
  - f. Update of action plan to administration on daily basis
  - g. Update of COVID19 cases to SAI management
  - h. Provision of information of Covid-19 helpline centres
  - i. Follow-up of foreign coaches and their health & travel advise
  - j. Training of facility management staff to follow the protocols
- ▶ COVID Task Force shall work closely with the coaches and support staff to define guidelines and protocols addressing the following questions –
  - a. What training can still be effectively performed from home?
  - b. How can training be staggered to minimise numbers and reduce contact?
  - c. How can the numbers at training be managed to maintain some social distancing?
  - d. How can training times be modified so that there are less people present at one time?
- ▶ The Task Force shall ensure each athlete and NSF staff provides a signed consent form declaring their consent and knowledge of all the limitations and risks associated with training under current scenario. SAI shall offer a training environment with best possible protection against infection. The precautionary measures and protocols mentioned in this SOP have been derived from study of best practices and inputs from experts but in no way could guarantee the complete elimination of risks posed by COVID-19 pandemic.
- ▶ Travel of trainees and coaches shall be closely regulated and monitored by



### Task Force

- ▶ The use of *Arogya Setu* app shall be made mandatory for all athletes and staff at the centre. The Task Force shall ensure a 100% coverage of *Arogya Setu* among all athletes and staff at the centre.

## 5.2. Disinfection of premises

- ▶ All areas within the premises shall be disinfected using clinically approved disinfectants (like 1% sodium hypochlorite solution) which have no significant side-effects on exposure through touch or smell. The areas to be disinfected are including but not limited to –
  - Entrances (doorknobs, handles etc.) to premise, buildings, rooms
  - All common areas which are used by trainees, staff and visitors
  - Playing surfaces, various equipment at the field of play, operational areas for field of play which includes control panels for irrigation system, floodlights and adjacent areas
  - Gyms and medical centres
  - Washrooms and toilets
  - All other surfaces which are touched by users after every single use
- ▶ The disinfection shall be performed by professional staff/agency and procedures will be set in place to ensure the same is performed at regular interval (minimum twice every week). Sample guidelines on disinfection is provided in **Annexure 2**.
- ▶ The schedule of disinfection activity must be intimated to all trainee and staff well in advance so that necessary training schedule is prepared based on the disinfection activity and the same should be appropriately displayed to bring to notice for visitors.

## 6. Guiding Principles for resumption of training



## 6.1. Implementation of necessary precautionary measures at the centres

### 6.1.1. Protocols and precautions for training

It is the **responsibility of National Sports Federations (NSFs)** to ensure complete adherence to training protocols and to secure agreement from respective athletes that any training activity undertaken shall be in full compliance to the protocols mentioned hereunder. NSF shall nominate a Hygiene Officer to ensure compliance and implementation of all protective measures for athlete and staff safety.

- ▶ Obligatory written confirmation (could be in the form of text message) of the infection-free condition of players and staff shall be provided to COVID Task Force officers before entering the premises
- ▶ All personal training equipment belonging to an athlete shall be disinfected while the athlete is inducted into the training centre.
- ▶ Athletes and staff shall be screened before being allowed access to common field-of-play/training facilities. Oropharyngeal or nasal Swab test shall be conducted for new/returning athletes (especially athletes in Olympic camps). MoHFW may be consulted for same regarding Government guidelines and cost of testing.
- ▶ FOP equipment shall be handed over to the athletes and support staff only by the ground staff wearing personal protective equipment for diagnostic officers (FFP 2-3, protective gowns, goggles, gloves)
- ▶ Athletes shall change before and after the training at their respective home or room. Use of low ventilated spaces and rooms that prevent social distancing, such as locker rooms and small dry-land rooms shall be eliminated.
- ▶ A coach or staff member should ask athletes, as they come into practice, if they feel ill in any way, specifically listing certain symptoms, and send home those athletes reporting illness or experiencing symptoms. Symptoms include mild to severe respiratory illness with fever, cough and difficulty breathing, or other symptoms.
- ▶ Athletes/coaches who begin to cough/sneeze for any reason, must move away from others until coughing/sneezing dissipates.
- ▶ As most injuries occur early in the season, deconditioned athletes shall not be rushed back to full practice, or competition. Activities may be increased by 10% each week upon resumption of training.

- ▶ Residential athletes requiring usage of common shower areas shall ensure soaps, towels and any other utility is not shared
- ▶ On-field training shall be conducted in small groups ensuring minimum distancing of 1.5 to 2 metres ("2 Gazkidoori"<sup>3</sup>) is maintained at all times by trainees and staff
- ▶ Any training equipment used shall be disinfected before next usage by a different individual. Athletes shall only be allowed to use personal equipment as including utilities like towels, water bottles etc.
- ▶ Hand-hygiene facilities shall be made available adjacent to field-of-play for use as and when necessary.
- ▶ Physical contact of any form shall be avoided as part of training routine, for example handshakes, high-fives, tackling, sparring etc.
- ▶ Spitting and clearing of nasal/respiratory secretions on the pitch or at any place within the facility other than toilets shall be prohibited.
- ▶ Training shall be planned in a manner which prevents the need of physiotherapy or recovery post training
- ▶ Use of swimming pool shall be avoided during this period. Separate SOP covering guidelines for swimming activities may be referred as necessary.
- ▶ All trainers and support staff shall also adhere to the precautionary measures mentioned in this SOP at all times without exception.
- ▶ Athletes shall also perform hand-hygiene before and after use of all training equipment
- ▶ Special precautions shall be taken for training engagement of para-athletes as per guidelines and instructions of qualified medical personnel.
- ▶ Athletes must remain inside the training facilities till the Covid-19 situation stabilizes
- ▶ No spectators shall be allowed within training centre at any time. Only athletes and training staff shall be present at the venue.
- ▶ Primary focus shall be on creating a healthy environment with quality experience, progressive training and safety of all athletes and staff.

<sup>3</sup>Ministry of Home Affairs (MHA) Order No. 40-3/2020-DM-I (A) dated 1<sup>st</sup> May, 2020

- ▶ Coaches may use downtime to ensure all safety skills are up-to-date, including complete sport safety, concussion training etc.

### 6.1.2. Precautions for gymnasium/physiotherapy room

- ▶ Use of gym shall be avoided/ limited to inescapable requirement; and as far as possible exercise shall be allowed using personal equipment, which shall not be shared by any other trainee.
- ▶ If exercising in gym is deemed necessary, distancing norms of 1.5 to 2 metres shall be adhered to at all times and it shall be ensured that no utility like towel, water bottle etc. is shared
- ▶ The use of gym shall be allowed in specific time slots, allowing sufficient time for disinfection between two slots, and the maximum number of people allowed to use the gym at a time shall be determined by the COVID Task Force of respective centre
- ▶ Use of the fitness equipment shall be permitted only while wearing gloves and face mask and under consequent use of disinfectants afterwards. Use of the fitness room shall be permitted only in small groups of maximum 5 people under observance distancing norms.
- ▶ Spatial separation and sufficient distance between gym equipment shall be ensured at all times.
- ▶ Each gym equipment shall be disinfected after every single use. Additional staff shall be appointed for proper disinfection of the gym equipment prior to continuous usage.
- ▶ Trainees shall be encouraged to undertake additional freehand exercises and practice yoga extensively during this period
- ▶ All physiotherapy/massage shall be avoided unless absolutely necessary. In case physiotherapy is deemed necessary, the following shall be exercised –
  - a. Athletes must take a proper shower before physiotherapy/massage
  - b. Athletes shall be treated individually in spacious, ventilated rooms. If necessary, additional rooms may be opened with disinfected examination couches.
  - c. Both the physiotherapist and the athlete shall sanitize hands prior and after the therapy session using sanitizers placed within treatment room
  - d. Both physiotherapist and athlete shall wear facial masks during the treatment session

- e. Physiotherapist shall use disposable gloves, discarding them after each therapy session
  - f. Physiotherapist shall avoid touching eyes, nose and mouth of the athlete
  - g. Athletes shall carry their own towel for the therapy session
  - h. All surfaces used during the course of each therapy session shall be disinfected before use for a different athlete
  - i. Medical equipment such as ultrasound/ shockwave/etc. shall be used economically and only after prior and subsequent disinfection.
  - j. Doors shall remain open as far as possible to avoid use of door handles
- ▶ Recovery areas including sauna, hydrotherapy etc. shall be made inaccessible during this period
  - ▶ Services of a masseur/ masseuse may be utilised preferably only once high intensity training starts or wherever recovery is an issue. Additionally, services utilising recovery equipment/ massage table/ game ready shall be resumed only after proper disinfection only.
  - ▶ As an interim measure, a massage chair/ Lympha Press system shall be used for recovery purposes by adopting due disinfection protocol.

### 6.1.3. Precautions at Medical Centre

- ▶ All Medical Room furniture in each room shall be sterilized prior to 8.30 am and then once again at 11 am.
- ▶ Patients entry door into the building complex shall have a wall installed hand sanitizer which must be used by every patient before entry.
- ▶ Medical facilities at the centre must be upgraded (including modern COVID diagnosis devices) to ensure all provisions are made for protection from and treatment of COVID-19 infection. Sufficient staff shall also be provisioned to handle such treatment.
- ▶ Athletes shall resort to tele-consultation as much as possible and not visit the medical centre unless it is a case of emergency.
- ▶ Any trainee/staff treated in the medical centre shall be treated in accordance to local/national protocols for treatment of infectious diseases.
- ▶ Entry shall be regulated, and marks shall be made outside the medical centre for maintaining social distancing by designating standing/waiting points.

- ▶ Screening of all patients shall be done at the entrance at separate tables placed in the waiting area.
- ▶ General medical check-up shall be conducted every weekend for all athletes and support staff including mess and horticulture staff, groundsmen, security etc) till situation stabilises. Medical register shall be maintained and checked regularly to track all personnel who may be susceptible to virus by virtue of respiratory illness or other relevant ailments.
- ▶ Minimum distancing criteria shall also be followed within the medical centre between patients
- ▶ All medical staff including Doctors, Nurses, Medical attendants, shall be advised to wear all necessary PPE like goggles, face shield, mask, gloves, coverall/gowns (with or without aprons), head cover and shoe covers while handling a suspected COVID-19 case.
- ▶ Adequate number of PPE, N 95 face masks, hand sanitizers should be available in wards
- ▶ Protocols shall be put in place for disposal of waste generated during treatment/ diagnosis/ quarantine of COVID-19 patients/suspected patients as per guidelines issued by Central Pollution Control Board.  
([https://www.tnpcb.gov.in/pdf\\_2020/Guideline\\_COVID\\_19\\_waste.pdf](https://www.tnpcb.gov.in/pdf_2020/Guideline_COVID_19_waste.pdf))
- ▶ Medical centre shall be operated in close coordination with local hospitals and treatment centres equipped with COVID19 testing and treatment. All concerned cases shall be dealt with as per guidance of these centres.
- ▶ Medical centre shall maintain close coordination with COVID Task Force and have direct access to COVID19 Helpline.

#### 6.1.4. Security procedures at entry gate

- ▶ ONLY ONE access point will be open for entry and exit to and from the centre respectively. The utilisation of facilities by non-SAI athletes/outsideers shall be prohibited till relaxations are announced by Government based on local conditions.
- ▶ Compulsory screening will be performed of all persons visiting the centres. The security personnel manning the entry gate at each shift shall be trained to perform the thermal tests and conduct screening based on any obvious symptoms.
- ▶ Provision of wash basin with soap solution or alcohol-based hand sanitiser

shall be made at the entry point and all visitors shall wash their hands before entering the premise.

- ▶ Any person exhibiting any symptom attributed to COVID-19 will be immediately prevented from entering the centre.
- ▶ All visitors or vehicles must have valid authorization issued by competent authority to enter the premise.
- ▶ Any parcel/courier shall be collected from building entry gate by the addressee.
- ▶ Any person entering the premise must be wearing a mask covering their nose and mouth.

#### 6.1.5. Sanitization at centre

- ▶ Hand sanitizers shall be made available at the entrance and a notice shall be displayed with guidelines on proper sanitization process
- ▶ Sanitizers shall be placed at entry points of rooms of officials, FOP, gymnasium, medical centre, dining hall/mess and other strategic points throughout the centre.
- ▶ Every person within the centre shall sanitize their hands regularly as per guidelines displayed on illustrative notices throughout the centre.
- ▶ Wherever possible, windows shall be kept open and operation of A/C avoided.
- ▶ Handshakes and other forms of greetings which need physical contact shall be avoided
- ▶ Meetings with trainee groups shall be avoided as far as possible
- ▶ For all discussions, which demand physical presence, trainees and staff shall strictly adhere to the social distancing norm of minimum 1.5 to 2 metres ("2 *Gazkidoori*") between each individual.
- ▶ All packed supplies delivered at centre shall be placed in an open area for a period of 24hrs (cardboard packing) or 72 hours (plastic packing) before usage. Unwrapped items like fruits or vegetables shall be washed under running water immediately after being delivered at centre. Fruits and vegetables may be soaked in diluted vinegar, salt or lemon water for few hours and left to dry prior to consumption

#### 6.1.6. Sanitization and precautions at common places/utilities

- ▶ Sanitizers shall be placed at entry point of all common areas and facilities
- ▶ All doors/windows shall be kept open at all times during office hours to avoid operation of A/C and provide natural ventilation.
- ▶ All surfaces, which can potentially be touched by multiple individuals shall be sanitized at regular intervals during the day.
- ▶ Special attention shall be given to surfaces in wash rooms/toilets/showers by periodical cleaning, swabbing and disinfecting.
- ▶ Mandatory 1.5 to 2 metres ("2 Gazkidoor") distance between tables and between individuals in serving area shall be maintained in canteen or mess
- ▶ Socialising and group meals shall be avoided
- ▶ Cooking of common item by multiple individuals shall be avoided. The food handlers shall be allowed to prepare and handle food with bare hands only upon practicing proper hand washing procedures. If gloves are used, the gloves shall be changed frequently and hands shall be washed whenever gloves are removed.
- ▶ Food handlers shall be quarantined as per norms upon returning to centre, and shall remain at the centre for a duration of 1 to 2 months after quarantine, working on a rotational roster
- ▶ Air filters shall be installed in common areas

#### 6.1.7. Precautions for residential trainee and staff

- ▶ Training Centres shall ensure that all athletes are accommodated in single rooms.
- ▶ The linen/bed sheets shall be changed at frequent intervals
- ▶ The use of toilet shall be allowed at a maximum 50% capacity to ensure social distancing in the toilet area as well
- ▶ Workout shoes should be kept separately, washed properly and dried under sunlight to keep it germ free. There shall be separate pair of shoes or Slippers for use outside the room and any footwear used for walking outside the room should be kept outside the room. Shoes or slippers must get cleaned properly and dried under sunlight.



- ▶ Windows of rooms should be kept open as much as possible to ensure ventilation
- ▶ Quarantine facilities for existing and new/returning athletes and staff shall be provisioned in a separate building to the hostel building. These quarantine rooms shall be well ventilated, with an attached washroom. Quarantine rooms shall be serviced by a separate pool of staff. The quarantine facilities shall adhere to all other recommendations mentioned in the Ministry of Health and Family Welfare (MoHFW) guidelines-  
<https://www.mohfw.gov.in/pdf/90542653311584546120quartineguidelines.pdf>

#### **6.1.8. Personal Protective Equipment (PPE) and additional measures**

- ▶ All trainee and staff within the premises shall be wearing mask covering nose and mouth at all time while present in common areas.
- ▶ All those involved in cleaning and sanitation activities shall make use of adequate PPE as provisioned at the centre
- ▶ Provision of adequate tissues and no-touch disposal receptacles shall be made.
- ▶ Provision shall be made for adequate liquid soap and water in the workplace. If hands are visibly dirty, soap and water should be chosen over hand sanitizer.
- ▶ Regular thermal screening shall be performed for all trainees and staff
- ▶ Provision of sufficient masks for all trainees and staff shall be made

#### **6.2. Athlete Education**

- ▶ Prior to resuming training activities at the centres, each athlete shall be educated on COVID precautionary measures, which are to be implemented at the facility and during training. Athletes shall be given refresher training on better hygiene and health safety practices.
- ▶ Non-residential athletes and residential athletes returning to the centre shall be educated on the existing precautionary measures regarding usage of common facilities within the centre.
- ▶ Provision shall be made for education material for athletes and other personnel to promote required behaviours (e.g. regular and thorough hand-

washing, covering mouth and nose with a tissue or sleeve during coughing/sneezing). Some topics on which resources (preferably published by WHO) shall be made available are -

- a. Good hygiene for coronavirus (COVID-19)
  - b. Hand washing guidance (Annexure 3)
  - c. Covering of coughs and sneezes
  - d. Self-isolation (self-quarantine) for coronavirus (COVID-19)
  - e. Advice for people at risk of coronavirus (COVID-19)
- ▶ Posters illustrating hygiene best practices and anti-COVID precautionary measures shall be displayed at clearly visible spots throughout the centre.
  - ▶ High performance/professional athletes and other personnel shall be educated on hygiene practices and required behaviours relevant to their sport and environment. Some mandatory precautionary practices include -
    - a. No sharing of drink bottles and towels.
    - b. No sharing of mats, or equipment without an appropriate cleaning protocol, in between training sessions
    - c. No physical contact in the form of handshakes, hugs, high-fives etc.
  - ▶ Use of *Arogya Setu* app shall be made mandatory and the athletes shall be trained on effective usage of the app
  - ▶ Resources published by Ministry of Health & Family Welfare may be found on the following link - <https://www.mohfw.gov.in/>
  - ▶ Resources published by WHO on everyday preventive measures may also be referred to through the following link – [https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public?gclid=EAlaIQobChMllo6fucyJ6QIVySMrCh222wpTEAAYASACEgJG\\_P\\_D\\_BwE](https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public?gclid=EAlaIQobChMllo6fucyJ6QIVySMrCh222wpTEAAYASACEgJG_P_D_BwE)

### 6.3. Categorization of sports and precautions for each category

SAI has categorized sports depending on the nature of training and competition requirements and assigned baseline precautions to each category<sup>4</sup>. These precautions shall be adhered to at all times without exception.

CATEGORY A	CATEGORY B	CATEGORY C	CATEGORY D
Non-contact sports	Minimal/Medium contact sports	Full contact sports	Water sports
Description			

<sup>4</sup>Resumption of Sport in India – COVID-19 Scenario, Indian Olympic Association (IOA)

CATEGORY A	CATEGORY B	CATEGORY C	CATEGORY D
Non-contact sports	Minimal/Medium contact sports	Full contact sports	Water sports
Individual sports with no requirement for physical contact during training or competition and minimal requirement for sharing of equipment	Mostly team sports which require some level of physical contact during training or competition and where equipment is usually shared	Individual sports (all combat sports) which require mandatory physical contact during training or competition	Individual or team sport which require presence in water body, albeit without swimming activity
<b>Examples</b>			
Archery, Shooting, Cycling, Fencing, Athletics, Weightlifting, Lawn Tennis, Badminton, Table Tennis etc.	Football, Hockey, Volleyball, Basketball, Handball etc.	Boxing, Judo, Wushu, Karate, Taekwondo, Wrestling etc.	Canoeing, Sailing, Rowing, etc. No swimming shall be permitted
<b>Precautions for training activity</b>			
<ul style="list-style-type: none"> <li>► Full array of training activities may be performed as individual or pair maintaining –               <ul style="list-style-type: none"> <li>i. distancing norms of 1.5 to 2 metres between athletes and staff</li> <li>ii. exiting facility as soon as training is concluded</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>► Training activities may be performed in small groups (maximum 8-10) maintaining distancing norms of 1.5 to 2 metres between athletes and staff and ensuring aspects of training which require physical contact are avoided like tackling, body-blocking etc.</li> <li>► The pitch shall be divided into three/ four areas, with a maximum of three players in each space who will train and stick to their partnerships should a player test positive for coronavirus.</li> <li>► Chief Coach and an assistant coach</li> </ul>	<ul style="list-style-type: none"> <li>► Selective training activities may be performed by athletes individually without engaging in physical combat with other athletes and utilizing alternative practice equipment like punching/kicking bags, slam balls, choke dummies etc.</li> <li>► Distancing norms of 1.5 to 2 metres between athletes and staff shall be maintained</li> <li>► Athletes shall exit facility as soon as training is concluded</li> </ul>	<ul style="list-style-type: none"> <li>► Full array of training activities may be performed as individual or pair maintaining –               <ul style="list-style-type: none"> <li>i. distancing norms of 1.5 to 2 metres between athletes and staff</li> <li>ii. exiting facility as soon as training is concluded</li> </ul> </li> </ul>

CATEGORY A	CATEGORY B	CATEGORY C	CATEGORY D
Non-contact sports	Minimal/Medium contact sports	Full contact sports	Water sports
	<p>shall oversee proceedings from the safe distance/ video tower, with the pair the only staff allowed to pick up balls and cones, which would then be disinfected.</p> <ul style="list-style-type: none"> <li>▶ Training shall be in small groups, players staying 10 metres from each other during exercises and sessions not exceeding one hour per day. However, “drastic measures” shall be taken to avoid contact with no competitive games being played.</li> <li>▶ Athletes shall exit facility as soon as training is concluded</li> </ul>		
<b>Precaution for equipment usage</b>			
<ul style="list-style-type: none"> <li>▶ Personal equipment such as bow, gun, sword, javelin, discuss, rackets etc. shall be used without sharing.</li> <li>▶ In the dire need of sharing any of such personally used equipment; equipment shall be properly disinfected after</li> </ul>	<ul style="list-style-type: none"> <li>▶ Personal equipment such as hockey stick, gloves, face masks, mouth guard, helmet, shin guards, wrist band, head band, shoes etc. shall be used without sharing.</li> <li>▶ All such equipment shall be properly disinfected after every single use as per the</li> </ul>	<ul style="list-style-type: none"> <li>▶ Personal equipment such as gloves, face masks, mouth guard, helmet, wrist band, head band, training uniform, shoes etc. shall be used without sharing.</li> <li>▶ All such equipment shall be properly disinfected after every single use as per the standard</li> </ul>	<ul style="list-style-type: none"> <li>▶ Personal equipment such as hats, swimsuits, training uniforms, swimming goggles. shall be used without sharing.</li> <li>▶ All such equipment shall be properly disinfected after every single use as per the standard procedure using disinfectant, wearing face</li> </ul>

CATEGORY A	CATEGORY B	CATEGORY C	CATEGORY D
Non-contact sports	Minimal/Medium contact sports	Full contact sports	Water sports
<p>every single use as per the standard procedure using disinfectant, wearing face masks, gloves and personal precautionary equipment etc.</p> <ul style="list-style-type: none"> <li>▶ Sports specific safety equipment such as a helmet, eye protectors, face protectors etc. shall not be shared.</li> <li>▶ Shared Training equipment such as arrows, targets, Olympic bar/ weights etc. must be disinfected after every single use.</li> <li>▶ Additional staff shall be appointed for proper disinfection of the equipment prior to continuous usage.</li> <li>▶ Equipment which is bound to be shared and utilised continuously during a training such as balls, shuttlecocks must be used carefully without using such equipment to rub/ touch face, remove sweat, cover mouth while hyperventilating etc.</li> </ul>	<p>standard procedure using disinfectant, wearing face masks, gloves and personal precautionary equipment etc.</p> <ul style="list-style-type: none"> <li>▶ Additional staff shall be appointed for proper disinfection of the equipment prior to continuous usage.</li> <li>▶ Equipment which is bound to be shared and utilised continuously during a training such as balls must be used carefully without using such equipment to rub/ touch face, remove sweat, cover mouth while hyperventilating etc.</li> <li>▶ Consistent hand sanitization is a must before, during and after every training session.</li> </ul>	<p>procedure using disinfectant, wearing face masks, gloves and personal precautionary equipment etc.</p> <ul style="list-style-type: none"> <li>▶ Additional staff shall be appointed for proper disinfection of the equipment prior to continuous usage.</li> <li>▶ Equipment which is bound to be shared and utilised continuously during a training such as punching/ kicking bags, slam balls, skipping ropes etc. must be used carefully without using such equipment to rub/ touch face, remove sweat, cover mouth while hyperventilating etc.</li> <li>▶ Consistent hand sanitization is a must before, during and after every training session.</li> </ul>	<p>masks, gloves and personal precautionary equipment etc.</p> <ul style="list-style-type: none"> <li>▶ Additional staff shall be appointed for proper disinfection of the equipment prior to continuous usage.</li> <li>▶ Equipment which is bound to be shared and utilised continuously during a training such as paddles, oars etc. must be used carefully without using such equipment to rub/ touch face, remove sweat, cover mouth while hyperventilating etc.</li> <li>▶ Consistent hand sanitization is a must before, during and after every training session.</li> </ul>

CATEGORY A	CATEGORY B	CATEGORY C	CATEGORY D
Non-contact sports	Minimal/Medium contact sports	Full contact sports	Water sports
<p>► Consistent hand sanitization is a must before, during and after every training session.</p>			

## 6.4. Continuous monitoring and management of protocols

To ensure smooth functioning/ structuring of the training and to achieve desired results after resumption of training, a proper monitoring process shall be put in place to ensure any early detection of illness within the training group.

### 6.4.1. Monitoring of athletes/support staff/ management staff –

- All athletes and support staff, including the ground staff and management staff shall be consistently apprised regarding early reporting of any suspected COVID-19 symptoms. Monitoring process shall include -
  - a. Submission of a weekly assessment/testing report by medical personnel and physiotherapist to the Doctor-in-charge at the respective training centre.
  - b. Assessment of symptom check, resting heart-rate and temperature. Further addition of a checklist of respiratory symptoms, with follow up of reported symptoms, shall be considered.

### 6.4.2. Managing a suspected COVID-19 case

- SAI shall refer to local State/Territory guidelines on the assessment process for a possible case.
- A doctor must make decisions about investigations, treatment, and management.
- Unwell athletes/other personnel must always call ahead before attending for assessment.
- All athletes/ other personnel must be made aware not to attend training if they

are unwell with any of the following symptoms, even if only mild:

- a. Cough
  - b. Sore throat
  - c. Fever (e.g. night sweats or chills)
  - d. Shortness of breath
- ▶ Any athlete with a possible respiratory tract infection should refrain from training (even at home) until a doctor, given the potential for worsening illness, has cleared them to do so.
  - ▶ If an individual is being tested for COVID-19:
    - a. They must immediately self-isolate and discontinue training until COVID-19 has been excluded and they have been medically cleared by a doctor to return to the training environment
    - b. Any such diagnosis and treatment shall be performed outside the campus premises
    - c. Isolation of close contacts will be a decision for medical staff, based on case specific details
  - ▶ Definition of close contacts:
    - a. Face-to-face contact in any setting with a confirmed or probable case, for greater than 15 minutes cumulative over the course of a week, in the period extending from 48 hours before onset of symptoms in the confirmed or probable case, or
    - b. Sharing of a closed space with a confirmed or probable case for a prolonged period (e.g. more than 2 hours) in the period extending from 48 hours before onset of symptoms in the confirmed or probable case
    - c. Contact is considered to have occurred within the period extending 48 hours before onset of symptoms in the patient, until the patient is classified as no longer infectious by the treating team (usually 24 hours after the resolution of symptoms)

#### 6.4.3. Managing a confirmed COVID-19 case

- ▶ COVID-19 is a notifiable disease and Local public health authorities must be immediately informed and steps taken as per instructions of the health authorities.
- ▶ Training facilities including medical centre may be closed on the instruction of the local Public Health Authority.
- ▶ Re-opening of the training facility should only occur after close consultation with the local Public Health Authority.

## References –

The SOP has been created through extensive research of available public domain information and expert consultation. A concerted effort has been made to ensure all measures and protocols mentioned in the SOP are derived from credible sources.

The following is a list of references used for creating the SOP –

1. The Australian Institute of Sport (AIS) Framework for Rebooting Sport in a Covid-19 Environment, May 2020
2. Standard Operating Procedure for Work Resumption after Lock down, BHEL
3. Ministry of Home Affairs (MHA) Order No. 40-3/2020-DM-I (A) dated 1st May, 2020
4. Guidelines for Quarantine Facilities, MoHFW
5. Getting your workplace ready for COVID-19, World Health Organisation
6. AIIMS booklet on COVID-19
7. Study on Resumption of Sport in India – COVID-19 Scenario, IOA



## Annexure 1

### Key Do's and Don'ts as per stakeholders

#### 1. Athletes

S.No.	Do's	Don'ts
1	Educate oneself of precautionary measures	Share any personal equipment or utility like water bottle, towel etc.
2	Change at respective rooms before and after training	Spit or clear nasal/respiratory secretions anywhere other than the toilet
3	Practice hand hygiene at regular intervals	Engage in any form of physical contact like hand shake, high-five, hugs etc.
4	Maintain distance of 1.5 to 2 metres from other individuals at all times and at all places	Socialise before or after training with other athletes/ staff
5	Shower before physiotherapy/ massage	Touch face or mouth while handling shared sports equipment
6	Immediately inform medical personnel if experiencing any illness and avoid training	
7	Use face masks while near other athletes/staff at any common area	
8	Exit training facility as soon as training ends	
9	Use <i>Arogya Setu</i> app	

#### 2. Coaches and support staff

S.No.	Do's	Don'ts
1	Educate oneself of precautionary measures	Allow physical contact of any form during training
2	Practice hand hygiene at regular intervals	Socialise before or after training with athletes/ other staff
3	Maintain distance of 1.5 to 2 metres between athletes and other staff at all times and at all places	Spit or clear nasal/respiratory secretions anywhere other than the toilet
4	Ensure disinfection of equipment shared by athletes before and after every use	
5	Immediately inform medical personnel if experiencing any illness and avoid training	
6	Use face masks while near athletes/ other staff at any common area	

S.No.	Do's	Don'ts
7	Use <i>Arogya Setu</i> app	
8	Ask athletes if they are feeling ill before each training session	

### 3. Physiotherapist

S.No.	Do's	Don'ts
1	Educate oneself of precautionary measures	Touch eye, nose or mouth of athlete
2	Sanitize hands prior to treatment	Allow more than one athlete to be in room during treatment
3	Wear facial masks during treatment	Allow congregation of athletes in the physiotherapy room
4	Use disposable gloves for treatment	
5	Disinfect every surface used during treatment after session	
6	Use <i>Arogya Setu</i> app	

### 4. Medical personnel

S.No.	Do's	Don'ts
1	Sterilise medical room furniture twice every morning	Allow congregation of athletes in the medical centre
2	Perform weekly check-up of all athletes and staff	
3	Provide weekly report to doctor-in-charge	
4	Screen all patients entering medical centre	
5	Train security staff on thermal testing	
6	Ensure social distancing is practiced in the waiting area	
7	Wear PPE gear while handling suspected Covid-19 cases	
8	Use <i>Arogya Setu</i> app	

### 5. Administrative and facility management staff

S.No.	Do's	Don'ts
1	Educate oneself of precautionary measures	Socialise in common areas
2	Practice hand hygiene at regular intervals	Engage in physical contact of any form
3	Wear masks while around athlete/ other staff in common areas	Conduct group meetings
4	Maintain social distancing at all times	

S.No.	Do's	Don'ts
	within centre	
5	Ensure disinfection of common areas, rooms, toilets at regular intervals	
6	Ensure availability of hand sanitizers at strategic locations to provide easy access	
7	Display posters in common areas highlighting the Do's and Don'ts	
8	Use <i>Arogya Setu</i> app	

## Annexure 2

### COVID-19: Guidelines on disinfection of common public places including offices<sup>5</sup>

#### Scope:

This document aims to provide interim guidance about the environmental cleaning/decontamination of common public places including offices in areas reporting COVID-19. Coronavirus Disease 2019 (COVID -19) is an acute respiratory disease caused by a novel Coronavirus (SARS-CoV-2), transmitted in most instances through respiratory droplets, direct contact with cases and also through contaminated surfaces/objects. Though the virus survives on environmental surfaces for varied period of time, it gets easily inactivated by chemical disinfectants.

In view of the above, the following guidelines are to be followed, especially in areas reporting COVID-19. For ease of implementation the guideline divided these areas into (i) indoor areas, (ii) outdoor areas and (iii) public toilets.

#### 1. Indoor areas including office spaces

Office spaces, including conference rooms should be cleaned and disinfected every evening after office hours or early in the morning before the rooms are occupied. If contact surface is visibly dirty, it should be cleaned with soap and water prior to disinfection. Prior to cleaning, the worker should wear disposable rubber boots, gloves (heavy duty), and a triple layer mask.

- ▶ Start cleaning from cleaner areas and proceed towards dirtier areas.
- ▶ All indoor areas such as entrance lobbies, corridors and staircases, escalators, elevators, security guard booths, office rooms, meeting rooms, cafeteria should be mopped with a disinfectant with 1% sodium hypochlorite or phenolic disinfectants.
- ▶ High contact surfaces such elevator buttons, handrails / handles and call buttons, escalator handrails, public counters, intercom systems, equipment like telephone, printers/scanners, and other office machines should be cleaned twice daily by mopping with a linen/absorbable cloth soaked in 1% sodium hypochlorite. Frequently touched areas like table tops, chair handles, pens, diary files, keyboards, mouse, mouse pad, tea/coffee dispensing machines etc. should specially be cleaned.
- ▶ For metallic surfaces like door handles, security locks, keys etc. 70% alcohol can be used to wipe down surfaces where the use of bleach is not suitable.

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<sup>5</sup>MoHFW website

- ▶ Hand sanitizing stations should be installed in office premises (especially at the entry) and near high contact surfaces.
- ▶ In a meeting/conference/office room, if someone is coughing, without following respiratory etiquettes or mask, the areas around his/her seat should be vacated and cleaned with 1% sodium hypochlorite.
- ▶ Carefully clean the equipment used in cleaning at the end of the cleaning process.
- ▶ Remove PPE, discard in a disposable PPE in yellow disposable bag and wash hands with soap and water.

In addition, all employees should consider cleaning the work area in front of them with a disinfecting wipe prior to use and sit one seat further away from others, if possible.

## 2. Outdoor areas

Outdoor areas have less risk than indoor areas due to air currents and exposure to sunlight. These include bus stops, railway platforms, parks, roads, etc. Cleaning and disinfection efforts should be targeted to frequently touched/contaminated surfaces as already detailed above.

## 3. Public toilets

Sanitary workers must use separate set of cleaning equipment for toilets (mops, nylon scrubber) and separate set for sink and commode). They should always wear disposable protective gloves while cleaning a toilet.

Areas	Agents / Toilet cleaner	Procedure
<b>Toilet pot/ commode</b>	Sodium hypochlorite 1%/ detergent Soap powder / long handle angular brush	<ul style="list-style-type: none"> <li>▶ Inside of toilet pot/commode - Scrub with the recommended agents and the long handle angular brush.</li> <li>▶ Outside - clean with recommended agents; use a scrubber.</li> </ul>
<b>Lid/ commode</b>	Nylon scrubber and soap powder/detergent 1% Sodium Hypochlorite	<ul style="list-style-type: none"> <li>▶ Wet and scrub with soap powder and the nylon scrubber inside and outside.</li> <li>▶ Wipe with 1% Sodium Hypochlorite</li> </ul>
<b>Toilet floor</b>	Soap powder /detergent and scrubbing brush/ nylon broom 1% Sodium Hypochlorite	<ul style="list-style-type: none"> <li>▶ Scrub floor with soap powder and the scrubbing brush</li> <li>▶ Wash with water</li> <li>▶ Use sodium hypochlorite 1% dilution</li> </ul>
<b>Sink</b>	Soap powder / detergent and nylon scrubber	<ul style="list-style-type: none"> <li>▶ Scrub with the nylon scrubber.</li> <li>▶ Wipe with 1% sodium</li> </ul>

Areas	Agents / Toilet cleaner	Procedure
	1% Sodium Hypochlorite	hypochlorite
<b>Showers area / Taps and fittings</b>	Warm water Detergent powder Nylon Scrubber 1% Sodium Hypochlorite/ 70% alcohol	<ul style="list-style-type: none"> <li>▶ Thoroughly scrub the floors/tiles with warm water and detergent</li> <li>▶ Wipe over taps and fittings with a damp cloth and detergent.</li> <li>▶ Care should be taken to clean the underside of taps and fittings.</li> <li>▶ Wipe with 1% sodium hypochlorite/ 70% alcohol</li> </ul>
<b>Soap dispensers</b>	Detergent and water	<ul style="list-style-type: none"> <li>▶ Should be cleaned daily with detergent and water and dried.</li> </ul>

- ▶ 70% Alcohol can be used to wipe down surfaces where the use of bleach is not suitable, e.g. metal. (Chloroxyleneol (4.5-5.5%)/ Benzalkonium Chloride or any other disinfectants found to be effective against coronavirus may be used as per manufacturer's instructions)
- ▶ Always use freshly prepared 1% sodium hypochlorite.
  - Do not use disinfectants spray on potentially highly contaminated areas (such as toilet bowl or surrounding surfaces) as it may create splashes which can further spread the virus.
  - To prevent cross contamination, discard cleaning material made of cloth (mop and wiping cloth) in appropriate bags after cleaning and disinfecting. Wear new pair of gloves and fasten the bag.
  - Disinfect all cleaning equipment after use and before using in other area
  - Disinfect buckets by soaking in bleach solution or rinse in hot water

#### 4. Personal Protective Equipment (PPE):

Wear appropriate PPE which would include the following while carrying out cleaning and disinfection work.

- Wear disposable rubber boots, gloves (heavy duty), and a triple layer mask
- Gloves should be removed and discarded damaged, and a new pair worn.
- All disposable PPE should be removed and discarded after cleaning activities are completed.
- Hands should be washed with soap and water immediately after each piece of PPE is removed, following completion of cleaning.

Masks are effective if worn according to instructions and properly fitted. Masks should be discarded and changed if they become physically damaged or soaked.

## Annexure 3

### Steps of Hand Hygiene



## Annexure 4

### Guidelines for use of mask

#### The correct procedure of wearing triple layer surgical mask -

- ▶ Perform hand hygiene
- ▶ Unfold the pleats; make sure that they are facing down.
- ▶ Place over nose, mouth and chin.
- ▶ Fit flexible nose piece over nose bridge.
- ▶ Secure with tie strings (upper string to be tied on top of head above the ears – lower string at the back of the neck.)
- ▶ Ensure there are no gaps on either side of the mask, adjust to fit.
- ▶ Do not let the mask hanging from the neck.
- ▶ Change the mask after six hours or as soon as they become wet.
- ▶ Disposable masks are never to be reused and should be disposed of.
- ▶ While removing the mask great care must be taken not to touch the potentially infected outer surface of the mask
- ▶ To remove mask first untie the string below and then the string above and handle the mask using the upper strings.
- ▶ Disposal of used masks: Used mask should be considered as potentially infected medical waste. Discard the mask in a closed bin immediately after use a closed bin immediately after use.