



OFA COVID-19 RETURN TO PLAY Guideline (Version 7)

Preamble

The federal and provincial governments have started to reopen the economy in a stepwise fashion. Sports play an important role in returning society back to a functioning economic and social life.

That said, however, sports Canada-wide also need to follow a stepwise progression in order to return to sport safely, with the primary health of people remaining at the top of the list of priorities.

Under the guidance of national sport organizations such as [Sports Canada](#) (SC), [Own The Podium](#) (OTP), [Canadian Sport Institute of Ontario](#) (CSIO), and [Ontario Ministry of Heritage, Sport, Tourism and Culture Industries](#) (MHSTCI), the [Ontario Fencing Association](#) (OFA) is therefore working on an exit concept from the lockdown that's considerate of the health circumstances we are currently facing in order to protect our members, families and communities. The concept is designed to gradually re-start our sport, all while respecting the rules issued by the Federal and Provincial Public Health authorities.

Simply put, regardless of any exit strategy, no fencing club should resume its activities except one that follows the current advice and recommendations of [provincial](#) and local public health authorities.

Note that the described return to play strategy is adaptable depending on the current rules and regulations issued by the local health authorities.

This return to play strategy is a **guideline** that should be considered alongside the [Own The Podium Club Risk Assessment and Mitigation Checklist Tool](#). To avoid ambiguity, below are three recommendations, in order, that clubs are responsible for prior to returning to fencing.



1. Abide by regulations set out by national, provincial, and municipal public health authorities. The directives by these authorities will always take precedence.
2. Score 'very low', to 'moderate' in the [Own The Podium Club Risk Assessment and Mitigation Checklist Tool \(Appendix B\)](#).
3. Follow the safety protocols outlined below

Disclaimer

The information in this document is not intended or implied to be a substitute for professional medical advice, diagnosis, or treatment. The OFA and its Members make no representation and assume no responsibility in respect of their information concerning COVID-19 as the circumstances are constantly changing, and any information on COVID-19 should be obtained from your Public Health Unit.

Risk Evaluation

Vaccination:

Completion of vaccination does not completely eliminate the risk of COVID-19 infection (including transmission of COVID-19 to others). Vaccines may be less effective against COVID-19 Variants of Concern. Unless directed otherwise by the Government of Ontario or your local [Public Health Unit](#), everyone should continue to follow Public Health Interventions regardless of their COVID-19 Vaccination status

The following must be followed to minimize the risk of spreading COVID-19:

Self-Assessment: before going to their training or competition session, each player and coach must complete a daily health self-assessment:

Do I, or anyone in my household have any one of the following symptoms in the past 14 days?

- a) Symptoms of acute respiratory disease: cough/sore throat/shortness of breath/difficulty breathing
- b) Fever over 38 degrees or chills
- c) Difficulty swallowing
- d) Sudden decrease or loss of smell or taste
- e) Nausea/diarrhea/abdominal pain
- f) Unexplained headache/body ache/fatigue
- g) Pinkeye
- h) Runny nose or nasal congestion without other known cause

IF YES to any of the above symptoms: do not go to training/competition, follow the advice of local health authorities.

Each player must inform their coach if the answer to the question above is YES. **Clubs are responsible for collecting and documenting this information, and informing any individual who is present at the same time as the player.**



A player or coach may not go to training if any of the following apply:

- a) If they have traveled outside of Canada in the past 14 days, the player must not return to the training facility until their self-isolation period is over.
- b) If an athlete tests positive for COVID-19, they cannot return to training until 14 days after the day the test was performed. If the athlete still has COVID-19 symptoms at the end of the 14 days, the athlete may not return to the training facility until 48 hours after all symptoms have resolved.
- c) If a household member or close contact is diagnosed with COVID-19, the player may not return to the training facility for 14 days after they were last in close contact with that family member. If the player is diagnosed with COVID-19 infection during that 14 days, they must follow the instructions outlined in b) above.

Tracking Presences:

At each training session the club must keep track of: the **first name, last name, e-mail address, and phone number** of each person present at the training session and the date/time/duration of the training session ([Sample Sign-In Sheet](#)). In addition, each individual must declare that:

- a) **They are not currently experiencing any COVID-19 symptoms by passing the Self Assessment outlined in #1**
- b) **They have read and understood the “[Daily Covid-19 Attestation and Agreement](#)” document, and initialed in the “Declaration of Health” column as confirmation of this agreement**

These documents must be kept for 2 years. This allows clubs to keep track of individuals inside the facilities, and to expedite communication to members and provincial healthcare authorities should a positive case arise within the club. An individual responsible for this should be designated ahead of time to maintain record consistency. Those present as participants or guardians, must initial in the Declaration of Health column.

Athlete Safety:

Athletes and coaches must be highly considerate in protecting the safety of themselves and those around them.

Self-Isolation:

Athletes and coaches must make the informed decision that [self-isolation](#) may need to be reinstated should an outbreak happen within their training group.

Hygiene & Behaviors

Club hygiene behaviors:

- Wear a face-mask during fencing training, including during bouts.
- Wearing face masks during exercise can lead to an increase in breathing rate, particularly in individuals with underlying lung or heart issues. This may also occur with mask shields, although to a lesser extent. It may be necessary to decrease the intensity/duration of training exercises to allow for recovery time. While bouts, fencers may require a brief recovery time after a point is scored.
- Frequent adjustments are inevitable between water breaks and fencing mask usage. Proper [hand hygiene](#) must be performed immediately prior to touching, or replacing of face masks.
- Any face-mask **adjustments** must be followed **immediately** by proper hand hygiene **without** cross-contamination to another surface (e.g. do *not* use the same hand to adjust the mask and open the bathroom door).
- As face masks will become damp with use during exercise (which makes them less effective at preventing spread of droplets while increasing the work of breathing), fencers should have at least one spare mask available to use when the first mask becomes wet.
- Face-masks **should be changed** if they become soiled or wet to maintain proper function. Reusable masks must be placed **immediately** in a sealable container to launder at home. Disposable masks must be **immediately** discarded directly into a **covered receptacle** after removal.
- The club should remind members that the [mode of infection happens via droplet transmission through the eyes, nose, and mouth](#).
- Clubs should be encouraged to [display posters promoting covering of mouth while sneezing, coughing, or heavy-breathing](#) as a strong reminder to reduce droplet-transmission to others.



- Clubs should have the **contact number for their local public health officer** posted in the training space.
- Clubs should, at minimum, clearly delineate an area within the training space designated to keep individual bags/equipment - to facilitate physical distancing.
- Where possible, clubs should also clearly display floor markers (tape) that display proper physical distancing in hallways and other traffic areas.
- **Ventilation of the training space will lessen spread of infection; if possible open doors/windows of the facility to allow fresh air to enter the training area. Consider doing training outdoors if possible.**
 - **For more information on ventilation in indoor settings, please refer to guidelines from the [Government of Canada](#) and the [CDC](#)**
- [Disinfect floors, door-handles, light switches, bathroom doors, bathroom faucets](#) before fencers arrive and after fencers leave. Frequently touched surfaces should be cleaned regularly.
- Install a [hand-sanitizing station at every club entry and exit point](#). ALL who enter AND exit the club must sanitize their hands. No exceptions.
- [Bathrooms should be cleaned](#) and disinfected on a regular basis. They should be used by only one person at a time to facilitate physical distancing.
- [No food or meals](#) to be eaten inside the fencing facility. Reducing the risk of touching the mouth and face while being outside of your home is of the utmost importance.
- Clubs should NOT share fencing-masks, gloves, jackets, weapons or any equipment for fencers to share. [Communal equipment should be discouraged. Clubs may choose to assign club equipment to a specific fencer for their own use until restrictions are lifted.](#) Every fencer should bring their own equipment.
- Clubs should not allow members to use communal water fountains. [Public water-fountains should be closed](#) with a clear sign and warning tape, until further notice. Sensor-activated fountains may be considered a better alternative where possible.
- Clubs should encourage everyone to [clean exercise equipment](#) such as exercise mats, medicine-balls, yoga-balls, and other equipment after every single use.

Personal hygiene behaviors:

- [Cough and sneeze into your elbow!](#) Remember transmission occurs via droplet which means through sneezing, coughing or spitting while talking.



- Every fencer and coach should [bring their own face towel](#) to prevent wiping sweat off their face with their hands. The towel should be clean every day.
- Every fencer should [bring their own water bottles](#). Absolutely no sharing bottles. Water bottles should be cleaned after every fencing practice.
- Every fencer should [bring their own hand-sanitizer](#).
- [Change into your sports attire at home](#), prior to coming to the club. When possible, bring a set of clean clothes in a bag to change into before leaving the club.
- Do not breathe heavily next to someone, even if they are 2 meters away in proximity.
- Keep a **minimum distance of 2 meters between individuals in all directions** [for less strenuous activities](#).
- [Wash your hands](#) with soap and water or disinfect with alcohol-based sanitizers, regularly
- Keep your bag/equipment in designated club areas only to maintain physical distancing.
- Masks should be disinfected after each practice session because they're most likely to be contaminated with droplets. Masks should be disinfected with Lysol wipes or [similar alternatives](#) after each session.
- Gloves should be allowed to dry in an open area (i.e. not inside a fencing bag) after each training session.
- Do not hug, shake hands, high-five or touch those around you. Remember to maintain physical distancing as outlined in the Roadmap to Reopen Framework.

Fencing hygiene behaviors:

- If a remote is used for score-keeping then fencers should use hand sanitizer before/after using remote.
- [Do not shake hands with your opponent or the referee](#) after a fencing match or fencing lesson. Salute instead.
- If you start to feel unwell while you are fencing, you should stop training immediately and leave the facility. Let your coach know that you are feeling unwell.

Parental hygiene behaviors:

- Remind your kids about good hygiene etiquette.
- Give your kids a clean, reusable water bottle so they avoid using public water fountains.
- If possible, drive them to their club and back instead of allowing them to take public transportation.
- Refrain from entering the club unless absolutely necessary, or unless your child is a minor and/or needs assistance. Adhere to proper PPE wear and physical distancing at all times.

Transportation to and from Training

Athletes and coaches are encouraged to go to training by walking, or cycling, or driving. The intention is to minimize prolonged exposure in potentially overcrowded situations such as public transport as much as possible. Those who need to use public transport, should try to avoid peak hours to avoid overcrowding.

Return to Fencing Strategy

Fencing training:

- All fencers/coaches participating in these activities have the responsibility to take measures to mitigate risk.
- Bouting and 1:1 combat lessons carry increased risk of spread of infection. Refer to the [Risk Mitigation Guidelines for Fencing Lessons \(FR/CN\)](#) for more information and a Risk Table of Fencing Activities (Infographics: [EN/FR/CN](#)).
- Individuals participating in either bouting and/or 1:1 combat lessons must be aware of this, and should perform a personal risk assessment prior to participating in these activities:
 - Individuals who are at increased risk of severe COVID-19 infection due to underlying health conditions, including but not limited to:
 - cardiovascular disease
 - diabetes mellitus
 - hypertension
 - chronic lung disease



- cancer
- chronic kidney disease
- obesity
- smoking

OR

- Individuals who live with others who are at risk of severe COVID-19 infection may decide to avoid these activities regardless of the current phase of RTP.

- During bouting or 1:1 combat lessons, it is important to minimize the time spent within 2 metre distance between individuals. After a touch is scored, both individuals should immediately return to the en garde line. During a combat lesson, once an action/series of actions is completed, both individuals should return to at least a 2m distance immediately. Corps a corps, “infighting” and fleching/running attacks are not permitted.

Return to Play Strategy:

The return to play strategy for fencing training is designed to be deployed in accordance with section 5 of the current [Roadmap to Reopening framework](#).

Sports and recreational fitness facilities

Before Step 1

Closed for indoor use except for high-performance athletes, child care, mental health and addiction support services, social services, and physical therapy (subject to conditions)

Step 1

Outdoor team sports – training only, 10 people maximum, 3 metres distance

Closed for indoor use except for high-performance athletes, social services and physical therapy

Step 2

Outdoor sports leagues open

Training for professional or amateur athletes and/or competitions

Step 3

Indoor open, with some restrictions

Outdoor open, with some restrictions

High-performance athletes are those defined as Olympic team or senior national team in preparation for the Olympics, including identified training partners.

The OFA reminds all clubs and members that they must, at all times, adhere to the Quarantine Act (Canada), the Emergency Management and Civil Protection Act (Ontario), as well as municipal bylaws and facility rules in place to COVID-19 physical distancing and public or private gatherings. Failure to abide by these federal, provincial, or municipal requirements may result in legal prosecution by the government.



Gathering Sizes:

The maximum number of individuals at any given time is dependent on the maximum gathering size permitted during the current Step in the Roadmap to Reopen framework.. This includes athletes, coaches, staff, and parents.

In addition to the gathering size limitation, distancing guidelines as outlined in the Roadmap to Reopen Framework must be followed. For smaller training spaces, this may mean that the maximum number of individuals inside the facility at any given time is **less than the gathering size maximum**.

Classes must be scheduled to allow for proper cleaning, **ventilation**, sanitation of high-contact surfaces and equipment, as well as for designated training groups to enter/exit the training space without overlapping at any given time.

Introduction of new individual(s) to existing designated groups (athlete or coach) during indoor training is not recommended until Step 3 of the Roadmap to Reopen framework.

Designated Training Groups:

Designated training groups should be set up for all athletes and coaches, with each athlete (and where possible, each coach) assigned to **one** training group only. This may change based on the Roadmap to Reopen regulations regarding indoor sports activities.

- **Each designated training group should include at least one coach, and the remaining numbers be made up of athletes.**
- Athletes from different training groups should **not** mix to avoid cross contagion.
- Athletes and coaches should only be associated with **one (1) club**, to avoid cross-contamination between clubs.

In cases where a coach is designated to multiple training groups, class schedules should be set up so that each coach leads as few classes as possible per day to minimize any transmission between designated training groups.

Positive Case:

If, at any point, an individual in a training group is diagnosed with COVID-19:

- Inform the entire group.
- Contact the appropriate authorities so they may begin contact tracing (clubs should have the **contact number for their local public health officer** posted in the training space to facilitate this process).
- The full group must enter self-isolation for 14 days.



Should this group include a coach who is also designated to another training group, every member in those additional training groups must also be informed and enter self-isolation for 14 days.

Coaches who live together in the same household are **considered as a single unit**. This means that, unless instructed otherwise by their local public health unit, should one coach or an athlete from one group be infected, **all athletes** that both coaches work with must return to self-isolation.

To protect personal health information, communication to the full designated group should only indicate that an incident has occurred, that individuals should self-isolate for 14 days, and to contact health authorities should they experience any unusual symptoms. Those without symptoms within those 14 days may return to training following authorization from their healthcare provider.

Even with the abundance of caution outlined with this document, return to fencing is not without risk of outbreak. Limiting designated training group sizes reduces the number of individuals that must be isolated, and allows for the remaining club members to continue training **after the club has followed all sanitation guidelines**. This is why it is imperative that athletes in different training groups should not mix.



Contact Persons and Responsibilities

Each athlete, coach, parent, and club administrator are expected to take responsibility in playing their role in implementing this concept, and ensure the health and safety of all those involved.

Each club is further responsible for nominating one person in charge of each training session (generally coach or team manager), who will have the duty of completing the list of athletes present, supervising the sessions, and further complying to the special constraints dictated by each phase.

Communication of the Concept

Though the OFA is communicating this return to play concept to its sanctioned clubs, each club must consider their own responsibility in ensuring a safe return to play. This concept is a minimal recommendation. Should you find the need for more strict measures, please don't hesitate to do so! The responsibility lies on the club. Additionally, each club is then responsible for communicating to all of its members, and for ensuring the good understanding and implementation of this return to play strategy regarding their own activities.