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## ***Return to Racing Recommendations for Race Directors***

May 7, 2020

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The information in these documents is not intended or implied to be a substitute for professional medical or legal advice. All content, including text, graphics, images and information, are provided for general informational purposes only. The knowledge and circumstances around COVID-19 are changing constantly and, as such, USAT does not make any guarantees that the information will always be up-to-date and accurate. This is a continuously evolving situation and the information included in this document will be regularly updated as circumstances change. You should seek advice from medical and legal professionals if you have specific questions about your situation or event.

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## *Return to Racing Recommendations for Race Directors*

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The Return to Racing Recommendations have been developed by experienced race directors and medical experts relying on fact-based recommendations from other expert resources such as the Centers for Disease Control and Prevention (“CDC”), World Health Organization (“WHO”), Occupational Safety and Health Administration (“OSHA”) and sport-specific guidelines developed by the United States Olympic & Paralympic Committee (“USOPC”) and the International Triathlon Union (“ITU”). The recommendations provided in this document are broadly focused to allow for clear, flexible, and scalable application across all sizes and scopes of endurance events. Importantly, event organizers must adhere to any rules or regulations that their local authorities’ issue; these recommendations are designed to be applied based on those local directives.

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## Section I: Phased Approach to Return to Racing<sup>1</sup>

The Return to Racing Recommendations have been developed to align with the three-phased approach for resuming normal business and lifestyle operations as provided by the Federal Government. Please note, these recommendations apply to the location of where your event is held. Here are the overviews from the Guidelines for the three phases:

- **Phase I Overview:** No events are permitted by state or local authorities. Virtual racing only and training with strict limitations while maintaining adherence to mass gathering thresholds, physical distancing and sanitation protocols. Virtual events are covered through insurance as long as they are sanctioned as a clinic through the USA Triathlon sanctioning system<sup>2</sup>. All decisions continue to be consistent with federal guidelines and guidance from state and local authorities, and aligned with local circumstances.
- **Phase II Overview:** In-person racing is permitted with local event size restrictions and strict limitations, and training with moderate limitations, while continuing to adhere to mass gathering thresholds, physical distancing and sanitation protocols. Perform a WHO risk assessment to determine if your event is located in a Very Low or Low Risk Category<sup>3</sup>. All decisions continue to be consistent with federal guidelines and guidance from state and local authorities, and aligned with local circumstances.
- **Phase III Overview:** In-person racing is permitted with no local event size restrictions and moderate limitations, and training with considerations, while continuing to adhere to physical distancing and sanitation protocols. Perform a WHO risk assessment to determine if your event is located in a Very Low or Low Risk Category.<sup>3</sup> All decisions continue to be consistent with federal guidelines and guidance from state and local authorities, and aligned with local circumstances.

## Section II: Impact to Racing and Recommendations for Event Planning and Operations

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The impact of coronavirus will undoubtedly have a long-lasting and significant impact on event planning and operations. The following recommendations are designed to provide a scalable application to all sizes and forms of endurance events.

Race organizers are ultimately responsible for the safety and well-being of their event participants and should exercise discretion for how they implement these recommendations at their own events. Before holding an event, race directors must 1) identify and adhere to the mass gathering limitations set by local authorities; and 2) have enhanced plans in place for preventing, mitigating, and responding to disease transmission.

These recommendations do not contemplate Draft-Legal events. If you are hosting a Draft-Legal event, please refer to the ITU Competition Rules.

### EVENT OPERATIONS

The following provides guidance for race directors holding events in Phases 2 and 3 and constitute a collection of recommendations from OSHA, WHO, CDC, U.S. Department of Health and Human Services, U.S. Department of Agriculture, ITU, USOPC and leaders in the endurance community.

#### SANITIZATION PROTOCOLS<sup>45</sup>

I. Basic infection prevention measures must be implemented to protect all persons at your event. This includes but is not limited to:

1. Post ample signage on-site encouraging regular hand washing and sanitizing
2. Have hand washing and sanitizing stations readily available and ample trash receptacles placed around event venue
3. Regularly cleaning high touch point areas
4. Require athletes, staff, volunteers, officials, and spectators to stay home if they are feeling ill
5. Discourage use of other people's equipment, phones, tools, etc.

II. How to implement at events:

1. Portable toilets
  - a. Provide ample sanitation options like hand wipes, sinks, or hand sanitizer immediately outside each portable toilet cluster
  - b. Increase the number of portable toilets to lower the ratio of athletes per portable toilet
  - c. Increase the physical footprint by adding some space between portable toilet to encourage socially distancing in lines
  - d. Consider additional signage to support physical distancing
    - i. Marking out 6-foot markers to distance within the line
  - e. Schedule additional cleaning or continue to sanitize throughout the event day
2. Hand washing and sanitizing stations
3. Have several hand washing and sanitizing stations available throughout the event venue
  - a. Place stations in key areas:
    - i. Restrooms
    - ii. Finish line

- iii. Post-race food
  - iv. Transition
  - v. Fluid stations
4. Have ample volunteers available to monitor and restock supplies continuously

## **VENUE SETUP AND FLOW<sup>6</sup>**

- I. Promote physical distancing and mitigate person-to-person contact
  - 1. Have ample signage placed in key areas of venue encouraging physical distancing
    - a. Add markings to the ground around potentially crowded areas to encourage people to spread out
    - b. Provide educational signage and ground markings for physical distancing in all areas where spectators may congregate
  - 2. Design your venue in a way that allows for smooth flow of athletes and spectators and mitigates crowds forming
  - 3. Consider restricting spectators
    - a. If allowing a small amount, limit to designated area(s) within venue
  - 4. Consider offering live athlete results tracking and/or live video stream to YouTube or other internet streaming services to encourage spectators to watch and track athletes from home
  - 5. Have the race announcer make announcements periodically to remind spectators about guidelines and government regulations

## **REGISTRATION AND PACKET PICK-UP**

- I. Registration and packet pick-up procedures should be altered to promote physical distancing and mitigate person-to-person contact
  - 1. Registration
    - a. Online vs. In-person
      - i. Consider type of event, past registration history
    - b. Anticipate how race format and timeline may dictate special
    - c. Questions that the event organizer needs to ask in online registration
      - i. Specific arrival times to the venue for certain groups of athletes
      - ii. Specific race start times for certain groups of athletes
      - iii. Specific athlete registration capacities per wave or time slot
    - d. Consider additional signage to support physical distancing
      - i. Marking out 6-foot markers to distance within the line
  - 2. Packet Pick-Up
    - a. Require multiple packet pick-up times with designated pick-up times, perhaps alphabetically by last name
    - b. Consider multiple run or bike shops to assist in dispersing the packets
    - c. Consider a drive-through packet pick-up if possible
    - d. Consider mailing packets to athletes ahead of time
    - e. Consider having packets at the racks themselves
    - f. Race Directors can elect to allow a single person to pick up packets for multiple registrants without proof of ID for each participant at packet pick-up while ensuring a signed USAT waiver has been completed. Proof of ID will be required on race day at bike check-in to ensure that all athletes are matching ID and registrant. This is a one-time exception given the circumstances. If screening is to be done at packet pick up, this exception should not be utilized.

### 3. Packet Composition

- a. Giveaways: Only competition-essential materials included inside the race package (e.g. no promo materials) while reducing packaging as much as possible
  - i. Give athletes an option to forego swag, limited swag, virtual swag or goody bag, or provide another pick-up option
  - ii. If offering swag, an option could be branded face coverings or other personal protective equipment

## **COURSE FAMILIARIZATIONS / RACE BRIEFINGS / SWIM WARM-UP**

- I. Course familiarization is easy to shift to a virtual format. Some possible solutions include:
  - 1. Drive the course and record on video to share over YouTube or similar platform
  - 2. Use virtual 3D mapping program with voice over instructions
  - 3. Standard graphic map with cues to accompany map lay out
  - 4. Virtual webinar escorting viewers through the course using graphic maps
- II. Race briefings should shift to a virtual format in Phase II:
  - 1. Record the briefing and post to YouTube or a similar platform
  - 2. All guidelines should be communicated to the athletes including normal event policies and procedures, when to arrive at the venue depending on assigned race start times, changes to event based on physical distancing and increased hygiene measures, courses, rules, etc.
  - 3. In Phase III, Virtual briefings are still recommended, but in-person briefings can occur if able to maintain local protocols
    - a. Consider multiple, smaller briefings instead of one larger briefing
- III. If at all possible, athletes should be given the opportunity to warm-up in the body of water that the race will take place while practicing physical distancing

## **EXPO AND PARTNERS**

- I. Expo should be altered to promote physical distancing and mitigate person-to-person contact
  - 1. Extended hours/footprint to limit the number of people in one area
    - a. If neither is an option, limit the number of expo vendors and space vendors further apart
    - b. Additional option is to assign times for athletes to enter the area
  - 2. Race merchandise sold exclusively online to eliminate giveaways
  - 3. Create one-way walking paths through the expo and clearly marking where people should stand in line
  - 4. Wipe down or use disposable table coverings
- II. Consider overcommunicating with partners regarding the status of the event, including being upfront about the limitations to the venue, athlete offerings, etc.

## **COURSE OPERATIONS**

- I. Transition Area
  - 1. Consider temperature screening upon bike check-in to transition area prior to racing
    - a. Based on the CDC definition of a fever and the symptoms of COVID-19<sup>78</sup>, if the athlete has a temperature of 100.0 degrees F or above, then athlete should be directed to event's medical lead for final determination on the athlete's ability to participate in the event
    - b. Consider a written or electronic questionnaire asking:
      - i. Have you tested positive for COVID-19?
        - 1. If yes in last 14 days: no participation
        - 2. If yes last positive test was over 14 days ago, ask if a follow-up test has been

performed and if they are currently negative

ii. Do you have symptoms? (cough, sore throat, fever, shortness of breath)

2. Consider spacing bikes a minimum of 3 – 4 feet between bikes per rack
  - a. More racks and less people per rack
  - b. Spread bike racks apart from one another rather than right next to each other
3. Areas will need to be sanitized prior to racing and once racing concludes
4. Consider check-in times for a subset of athletes
5. All equipment checks should be visual in nature
6. No one should touch or handle gear other than the athlete who owns it

## II. Start area

1. Consider a time trial start vs. mass start
2. Start time intervals where athletes are not permitted to congregate outside of designated time
3. Consider eliminating water station at swim start or only allow athletes to bring their own water bottle to utilize

## III. Swim Course

1. To separate waves, consider either doing start corrals or having strong communications to athletes to not gather around the swim start area until their wave is on deck
2. Consider a larger start area if possible
3. Consider smaller and more frequent waves
4. Consider no wetsuit stripping
5. Lifeguards
  - a. Ensure that lifeguards are properly equipped with lifesaving equipment
  - b. Consider supplying lifeguards with face shields/CPR rescue face coverings
6. Considerations for pool swims
  - a. To promote physical distancing, pool swims should be conducted in a time-trial format
  - b. In a time-trial format, athletes should self-seed themselves from fastest to slowest to mitigate passing in the water
  - c. Consider blocking every other pool lane and prohibit athletes from swimming in the same lane towards each other

## IV. Bike Course

1. Provide the best possible athlete distribution on the bike course to support physical distancing
2. Under any racing format, encourage athletes to wear face coverings if possible
3. Minimize pinch points of the course where cyclists are forced to ride close to each other because of road conditions or other obstacles

## V. Run Course

1. Encourage athletes to wear face coverings, if possible
2. Minimize pinch points on the course that cause athletes to naturally run closer to each other
3. Consider a looped course vs. out and back
4. The athletes are recommended to avoid running directly behind another athlete at a distance less than 13 feet. If the distance is less, it is recommended to be either at a 45-degree angle or alongside the other athlete and avoid facing each other

## VI. Relay Exchange Zone

1. A line must be drawn within the exchanging area. When the finishing athlete passes this line, the next athlete from the same team starts without any physical contact.
2. Consider giving each individual athlete their own chip to eliminate hand-off of chips from one athlete to another



3. Adjacent corridors must be provided for incoming and outgoing athletes

## **AID STATIONS<sup>9 10</sup>**

I. Based on the guidance of the U.S. Department of Health and Human Services and the U.S. Department of Agriculture, many elements of aid stations fall under the concepts of food safety. Pouring fluids and distributing cups should be considered part of a food safety protocols.

### II. Aid Stations for Run Courses

1. Consider small single serve mini-water bottles
  - a. Have a recycling plan in place
2. Consider allowing athletes to bring their own water bottles or cups that they race with
  - a. Handheld running water bottle
  - b. Collapsible cups
  - c. Consider designated tables for athletes bringing own water bottles, bottles must be specifically marked and spaced to accommodate distancing
  - d. Eliminates the need for several volunteers at aid stations
3. Have ample cleaning and sanitation supplies including but not limited to face coverings, gloves, hand sanitizer, paper towels, hand wipes, trash cans, and garbage bags
4. Volunteer staffing
  - a. All aid station volunteers should have on gloves and face coverings
  - b. Volunteers should be permanently grouped into a group that only pours cups and a group that only hands cups out. If a volunteer handing out cups comes in contact with an athlete, we do not want to cross contaminate with the pouring station
  - c. If a volunteer comes in contact with an athlete, they should replace their gloves and use wipes to wipe the area of the body that was touched<sup>11</sup>.
5. Aid Station setup WITH volunteers
  - a. To prevent athletes from pouring their own fluids, staging tables for fluids should be kept 6 feet back from the running lane if possible
  - b. Volunteers should wear face coverings and gloves, handing cups directly to athletes
  - c. Cups should be held from the bottom to avoid contact with the rim of the cup by the volunteer and this will force athletes to grab the top half of the cup
  - d. Plan for additional trash cans and trash bags after the aid station to encourage athletes to toss their used cups and other trash directly into bins
6. Aid Station setup WITHOUT volunteers
  - a. If no or minimal volunteers are available, cups should be pre-poured and staged on a table close to the running lane
  - b. Plan for several more tables than normal so there is a longer range for athletes to grab a cup
  - c. Spread cups out to mitigate the chance of an athlete touching other cups when they grab one
  - d. Plan for additional trash cans and trash bags after the aid station to encourage athletes to toss their used cups and other trash directly into bins
  - e. Consider designated tables for athletes bringing own water bottles, bottles must be specifically marked and spaced to accommodate distancing

### III. Aid Stations for Bike Courses

1. All athletes should be encouraged to bring an ample amount of their own fluids to eliminate the use of aid stations on the bike course
2. If a bike course aid station is necessary, only pre-filled bottled fluids should be used

3. Avoid pouring fluids for athletes into their own bottles as this will create a bottleneck and cause people to be too close together
4. Volunteers should use gloves and face coverings

## **BAG DROP & GEAR CHECK**

- I. Consider eliminating bag drop
- II. If moving forward with a bag drop:
  1. Recommend a self-service bag drop with appropriate spacing between bags and close oversight by staff and volunteers
  2. Athletes' bag (equipment) should be put in a disposable bag provided by the Race Management
  3. Athletes leave the identified bag on their corresponding numbered spot in a tent, parking lot, grass area, etc.
  4. Athlete must anticipate delays as they may encounter a queue
  5. For collection athletes must show their bib number and the volunteers will deposit it on the table

## **BODY MARKING**

- I. Utilize self-body marking to promote physical distancing
- II. Consider using self-application tattoos
- III. Provide athletes a diagram on how and where to apply body marking

## **FINISH LINE**

- I. Finish line setup and procedures should be altered to promote physical distancing and mitigate person-to-person contact.
- II. Layout/size
  1. Consider significantly expanding the size of the finish area so that finished athletes can spread out as they recover but minimize contact with staff and volunteers
  2. Consider creating finishing lanes at the start, or just prior, and within the finish chute to avoid close contact of athletes with one another
  3. Post signage around the finish line and bleachers encouraging physical distancing
  4. If many spectators are expected, consider having additional bleachers present so spectators can spread out and up if spectators are permitted based on phases
  5. Consider not using a finish tape or if using, it should be discarded after the first athlete finishes and not reused
- III. Flow
  1. Have several vocal volunteers present to tell athletes to keep moving and not to congregate
  2. It is important to keep the finish area clear of clusters of athletes, so incoming athletes are not blocked from finishing
- IV. Fluids
  1. Water and/or Gatorade should be handed to athletes by staff or volunteers and athletes should not be permitted to grab their own water or Gatorade
  2. Towels should not be used to eliminate the possibility of cross-contamination, but dry towels may be given away at the completion of the race
- V. Finisher Medals
  1. Recommend virtual medal ceremony or consider virtual medals that are sent to athletes electronically

2. If medal ceremony is in-person:
  - a. Finisher medals should be handed to athletes by staff or volunteers with gloves and face coverings on
  - b. Staff and volunteers should not put the medal on the athlete, but rather hand the athlete the medal
  - c. An alternative is to have medals spread out on several tables to athletes to grab themselves (with staff/volunteers monitoring)

#### VI. Timing Chip Retrieval (if not using disposable timing chips)

1. Timing chip collection should occur near the exit of your finish line. Consider extending the finish exit chute and provide chairs for people to sit and remove their own chips.
2. Have vocal volunteers dedicated to chip collection but requesting that athletes remove chips themselves and only assisting athletes if they absolutely need to
3. If possible, disposable chips should be considered
4. Any volunteer retrieving chips should wear face masks and gloves, replacing gloves often

#### VII. Staffing

1. Ample volunteers and staff should be positioned in the finish area to keep it clear and keep finished athletes flowing out of this area as it can become very congested

### **TIMING AND TIMING CHIPS**

#### I. Timing chip distribution/pick-up

1. Consider pre-stuffing timing chips in race packets so athletes do not have to wait in a separate line or go to a separate table/tent to get their chip
2. If a separate tent or table is required for timing chip distribution, consider additional tables so that chips may be spread out
3. Also consider having separate queue lines based on race number to mitigate long lines

#### II. Timing chip retrieval processes – see finish line section above

#### III. If possible, disposable chips are encouraged

#### IV. Chips and straps should be disinfected prior to them being issued and upon the completion of the race, chips and straps should be disinfected again

#### V. Timing strips, mats or check points at any place on the course should be made as wide as possible to allow for physical distancing

### **POST-RACE FOOD<sup>1213</sup>**

#### I. Infection mitigation procedures should be implemented when determining processes for food preparation and serving

1. Consider at least a 6-foot buffer between food preparation areas and foot serving areas
2. If you have post-race food:
  - a. All staff or volunteers handling or in close proximity of food must wear face coverings and gloves
  - b. It is recommended that meals are pre-packaged boxed meals for athletes to take to go
    - i. Performed by single individual for each athlete to minimize the number of people who touch their food and hydration

3. There should be a designated queue line and after athletes receive their meal, they should go to their car. For this to be efficient and comply with the guidelines, there should be at least two volunteers to implement but is contingent on race size. Barriers should be considered between the athletes and the food and servers – servers to wear face coverings or shields. Alternatives could be:

- a. Consider not providing post-race food. If this is the direction that you have chosen to go, make sure that athletes are aware prior to registering
- b. Consider offering a voucher for athletes to claim their post-race food at a local restaurant
  - i. Option 1: Pre-pay for the meals so there is not an out of pocket cost for athletes and then reconcile with the eatery after the expiration date on the vouchers has passed
  - ii. Option 2: Negotiate a discount rate that athletes will pay at the local eatery for their food

## OFFICIATING

- I. Please refer to [USA Triathlon's Return to Racing Guidelines for Officiating](#)

## AWARDS AND AWARD CEREMONIES

- I. Award ceremonies can easily be implemented virtually instead of in-person
  1. Consider virtual ceremony
  2. Consider virtual awards versus hard awards
  3. Consider mailing awards after the event
  4. Consider spreading out awards over several tables and having athletes retrieve their own awards (with a few staff members/volunteers nearby to monitor). If elected to have podiums, space them out and only call one athlete up at a time. Additionally, avoid physical contact including but not limited to high fives, hugs, and handshakes.

## ATHLETE, STAFF AND SPECTATOR SERVICES AT EVENTS

### EVENT MEDICAL AND SAFETY OPERATIONS <sup>14</sup>

- I. Basic medical procedures must be implemented to protect the safety of the medical workers, volunteers and participants
  1. Develop event medical plan with attention to COVID-19 factors
  2. Staffing
    - a. One to two staff members should be dedicated to constantly cleaning tables, chairs and other high touch points after each athlete leaves an area. An additional consideration should be disposable covers on each of these items.
    - b. Consider Medical and Security staff given authority to screen a participant, staff member or spectator presenting symptoms
  3. Screening
    - a. Screen everyone entering the venue
    - b. Have medical staff equipped with thermometers, extra face coverings and gloves
    - c. Based on the CDC definition of a fever and the symptoms of COVID-19<sup>15 16</sup>, if the athlete, staff member, or volunteer has a temperature of 100.0 degrees F or above, then they should be directed to event's medical lead for final determination on their participation and presence in the event
    - d. Consider a written or electronic questionnaire asking:
      - i. Have you tested positive for COVID-19?
        1. If yes in last 14 days: no participation
        2. If yes last positive test was over 14 days ago, ask if a follow-up test has been performed and if they are currently negative.
        3. Do you have symptoms (cough, sore throat, fever, shortness of breath)?
  4. What to do if an athlete shows symptoms

- a. The appropriate medical and security staff should be notified
  - b. Provide presenting individual with appropriate PPE and escort to designated COVID-19 isolation location
  - c. After evaluation, if individual is asked to leave venue, they should be provided with information regarding local medical resources and instructed to receive further evaluation
  - d. If individual needs assistance to be escorted from venue, local medical protocols will be used to complete transport
5. Medical tent setup
- a. Consider a larger tent for medical, with the ability to open up or remove walls, to allow medical staff and athletes in need of medical help to spread out. It is important to keep in mind that there should still be privacy rooms within the medical treatment area.
  - b. Cooling pools should not be used
  - c. Consider having several cooling fans present if necessary
6. Supplies
- a. Have ample hand sanitizer, fresh towels and wipes, trash cans and bags, and other necessary cleaning supplies

## **MEDIA**

- I. Consider limiting media
- II. Credential all media in advance of the event and define areas that they are permitted to gather to maintain physical distancing guidelines

## **STAFF AND VOLUNTEER CONSIDERATIONS AT EVENT**

### **COMMUNICATIONS**

- I. Remind staff and volunteers that official communications about the event is only to come from the race director or other appointed person in charge of media communications. DO NOT speculate on event changes, athlete or staff illnesses or injuries, or other variables surrounding the pandemic and its effect on the event.

### **HEALTH OF STAFF/VOLUNTEERS**

- I. Staff and volunteers not feeling well must not attend the event. They must be sent home if they arrive and are unwell.
- II. Have temperature checks available

### **AMOUNT AND LOCATION OF STAFF/VOLUNTEERS**

- I. Reduce staff and volunteers where possible but increase in key areas, as necessary
- II. Some areas that may require more staff or volunteers to best promote hygiene and physical distancing include:
  1. Packet Pickup
  2. Aid stations
  3. Finish line
  4. Food-prep and distribution

### **SUPPLIES**

- I. Have ample hand sanitizer, face coverings, gloves, water, food, sunscreen, and other essentials on hand to keep staff and volunteers well equipped to do their jobs

## GLOVES

I. Not ALL staff and volunteers need gloves. Remember, gloves only protect the person wearing the gloves. Dirty gloves can transmit disease in the same fashion as dirty hands without gloves. Gloves should only be worn in key areas of food/fluid prep, close proximity to athletes, or other areas as necessary where transmission of disease or dirty substances is high.

## PUBLIC SAFETY AND SECURITY (SPECTATORS AND GENERAL PUBLIC)

- II. Plans should determine who is allowed at the event or in specific designated areas. An example of this is grouping people into tiers from essential to non-essential<sup>17</sup>.
- a. Tier 1 (Essential): Athletes, coaches, officials, event staff, medical staff, security, anti-doping officials
  - b. Tier 2 (Preferred): Media, volunteers, recovery staff (e.g., massage therapists)
  - c. Tier 3 (Non-essential): Spectators, vendors
1. Phase 1
    - a. Consider no spectators or a limited number of spectators in accordance to federal, state, local government mass gathering thresholds
  2. Phases 2 and 3
    - a. Using multi-modal communication strategies, encourage at high-risk individuals for illness not to attend the event (See list of high-risk factors in reference 6)
    - b. Identify individuals with possible infection by:
      - i. Screen everyone entering the venue (Tiers 1-3)
      - ii. Have designated security and medical personnel observe spectators and general public (Tier 3)
      - iii. All designated security and medical personnel should be equipped with appropriate Personal Protective Equipment (PPE) and thermometer for screening
      - iv. If individual is identified with signs and symptoms follow appropriate protocols developed in medical plan (Tiers 1-3)
  3. Infection mitigation and medical response considerations
    - a. Create lines of communications between medical team, local EMS personnel, event organizers, event staff, athletes, coaches and spectators
    - b. Multi-modal communication should be utilized to distribute COVID-19 information for the general public and spectators (Tiers 1-3)
    - c. Use different entrance/exit spectators and general public (Tiers 1-3)
    - d. Identify access/egress routes for medical personnel for ill patient removal and appropriate measures to be taken to ensure safety.
    - e. Create clear areas of separation between athletes, staff, volunteers, spectators and general public
    - f. Provide multiple hand sanitizer/trash receptacle stations in venue near high touch areas
    - g. Provide post-event summary to athletes, coaches, event staff, media, spectators, general public

## ATHLETE COMMUNICATIONS AND PREPARATION FOR RETURN TO RACING

### ATHLETE RESPONSIBILITY

I. Athletes should pre-monitor their health status continuously for 14 days before the event (including monitoring symptoms and taking temperature)



- II. Consider a pre-race medical questionnaire to be sent out to the athletes to be completed in the week prior to racing that may be reviewed

## **ATHLETE PRE-RACE BRIEFINGS**

### **I. Virtual vs. In-person**

1. Virtual is recommended
  - a. Record the briefing and post to YouTube for athletes that cannot attend the live briefing.
2. All guidelines should be communicated to the athletes including normal event policies and procedures, when to arrive at the venue depending on assigned race start times, changes to event based on physical distancing and increased hygiene measures, courses, rules, etc.
3. In-person briefings should only occur once mass gathering restrictions are relaxed
  - a. Consider multiple briefings
  - b. Adhere to gathering thresholds

## **ATHLETE RETURN TO TRAINING**

- I. Race directors are encouraged to refer athletes to the resources outlined in the forthcoming Return to Racing for Athletes and Return to Racing Training Program created in conjunction with USA Triathlon athletes and coaching education department
- II. Race directors should consider partnering with their local USA Triathlon certified coaches to provide in-person and virtual coaching sessions that can be geared more individually to their athletes needs and geographical constraints

## **INSURANCE AND SANCTIONING**

1. If you sanction your event with USA Triathlon, you receive the benefit of general liability insurance coverage. Specifically, if an athlete brings a claim against you for negligence alleging that they contracted a virus, illness or disease at your event, the insurance coverage provides a legal defense for you in most cases. Race Directors should feel comfortable moving forward with hosting their events knowing this coverage is in place to protect them.
2. If an athlete claims they contracted the Coronavirus at a sanctioned event and tries to file a medical claim using the participant accident policy, their claim will not be covered. USA Triathlon's participant accident policy is intended for accidents that happened during a sanctioned race and will respond to cover those injuries. It will not cover standard medical issues such as getting sick in some way, viruses and bacterial infections – all of which are excluded from the USA Triathlon policy.

## **SAFE RETURN TO WORK FOR EMPLOYEES**

Based on guidelines presented by the Federal Government, employers should implement a phased approach to returning to work. This includes, but is not limited to:

- a. Developing and implementing<sup>18</sup> appropriate policies, in accordance with Federal, State, and local regulations and guidance
- b. Encouraging telework whenever possible and feasible.
- c. Minimizing non-essential travel

## Section III: Resources

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1. [CDC Situation Analysis](#)
2. [CDC Mass Gathering Guidelines](#)
3. [List of Tests Approved in United States](#)
4. [OSHA Guidelines for Hazard Prevention](#)
5. [OSHA COVID-19 Control & Prevention](#)
6. [EPA-Approved Products to Use](#)
7. [International Triathlon Union Medical Resources](#)
8. [WHO COVID-19 Main Website](#)
9. [FAQs on Mass Gatherings and COVID-19 including Sporting Events FAQs](#)
10. [Key planning recommendations for Mass Gatherings during COVID-19](#)
11. [WHO Generic Risk Assessment and Mitigation Checklist](#)
12. [WHO interim guidance on how to use risk assessment and mitigation checklist](#)
13. [Decision tree flowchart for mass gatherings in context of COVID-19](#)
14. [International Traveling Health Guidelines](#)
15. [Advice on use of face coverings](#)
16. [WHO interim guidance – “Considerations in adjusting public health and social measures in the context of COVID-19”](#)
17. Personal Protective Equipment (PPE)
  - a. [Leslie Jordan](#)
  - b. [Alanic 7-7-7 Program](#)
  - c. [BOCO Gear](#)
    - i. BOCO Gear is offering up their new Face Coverings and Performance Gaiters in the legendary BOCO quality you know and trust. Pick from some really cheery in-stock mask designs [here](#) or order Custom Designs for your Event by emailing [hillary@bocogear.com](mailto:hillary@bocogear.com)
  - d. [MPA Event Graphics](#)
    - i. Custom-printed reusable ice silk face masks with adjustable bungee straps now available. Price per unit is \$8.10 for minimum order of 50. Quantity discounts available. Contact [sales@mpagraphics.com](mailto:sales@mpagraphics.com) for more info.
18. Virtual Swag
19. [Fanomena](#)
  - a. [Virtual Event Bags](#)
  - b. [Digital Event Bag](#)
20. Meetings / Briefings
  - a. [Zoom](#)
  - b. [Cisco Webex](#)
  - c. [BlueJeans](#)
  - d. [Google Hangouts](#)
21. Cleaning supplies, hand sanitizer, sanitizer stands, etc.
  - a. [Uline](#)
  - b. [Bulk Apothecary](#)
22. Signage and street graphics
  - a. [MPA Event Graphics](#)



DISCLAIMER: While the advice given in these recommendations has been developed using the best information available, it is intended simply as guidance to be relied upon at the user's own risk. USA Triathlon does not take responsibility for the accuracy of any information or advice given or omitted herein nor does any person, organization or corporation connected with providing this guidance. The foregoing parties are not liable for any consequences whatsoever resulting directly or indirectly from compliance with or adoption of this guidance.

These recommendations will be updated according to the latest information from the WHO, CDC and other health authorities, as well as the USOPC, ITU and other resources released on this topic.

#### Endnotes

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