



Michigan State Youth Soccer Association

U-M School of Public Health (COVID) FAQs

These are your questions answered by the School of Public Health. If you have any additional questions, please submit those questions to stateoffice@michiganyouthsoccer.org and reference U-M.

Updated January 21, 2021 – subject to change

Definitions

- a) **Symptomatic:** when a person with a COVID-19 infection shows signs of their illness, such as cough, fever, headache, fatigue, etc.
- b) **Asymptomatic:** when a person with a COVID-19 infection does not show any signs of their illness.
- c) **Social Distancing:** putting physical distance between yourself and other people. This means avoiding groups of people (parties, crowds on sidewalks, lines in a store, etc.) and maintaining distance (approximately 6 feet) from others when possible.
- d) **Quarantine:** separating individuals who have had close contact with someone with COVID-19 to determine whether they develop symptoms or test positive for the disease. Quarantine for COVID-19 should last for a period of 10 days after the last known close contact with the infected person. Quarantine can end after 10 days if no symptoms have been reported during daily monitoring, with continued daily symptom monitoring until 14 days after last known close contact with the infected person. Typically quarantining requires individuals to remain in their homes in accordance with their local health department until it has been deemed appropriate for them to leave their quarantine.
- e) **Isolation:** separating people who are ill (either showing symptoms after being exposed to a COVID-19 case or having a positive COVID-19 test result) from others who are not ill to keep the disease from spreading. Isolating requires individuals to completely separate themselves from all others (including household members) by remaining in their homes away from others (preferably with their own room, bathroom, and other necessities) until their local health department deems it appropriate to be released from their isolation (at least 10 days since symptom onset, resolution of fever, and at least 24 hours of improvement of symptoms).
- f) **Close Contact:** any individual who is within 6 feet of an infected person for at least 15 minutes starting from 2 days before the infected person began showing symptoms of their COVID-19 infection (or, for asymptomatic persons, 2 days prior to their positive COVID-19 test date) until the time the case is isolated.
- g) **Direct Contact:** Being exposed to infectious secretions of a COVID-19 case without the use of proper PPE (procedural Mask, N95 mask with face shield, gown, gloves, etc.). This and close contact are both ways that individuals may be exposed to COVID-19.



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- h) **COVID-19 Case:** A person who tests positive for a current COVID-19 infection (asymptomatic or symptomatic).
- i) **COVID-19 Point of Contact:** the individual that a club designates as their person to handle COVID-19 related issues of their club. These individuals are responsible for enforcing club and MSYSA COVID-19 policies and being the lead person for any COVID-19 club concerns.
- j) **The Health Insurance Portability and Accountability Act of 1996 (HIPAA):** a federal law that required the creation of national standards to protect sensitive patient health information from being disclosed by **healthcare/health insurance** companies without the patient's consent or knowledge.

Frequently Asked Questions (FAQs)

Training/Activities

- 1) Are players allowed to throw the ball in during training?
No. Throws-ins are not allowed at this point.
- 2) Can players 'head' the ball during training?
At this point, headers are not permitted during training.
- 3) Can clubs conduct small group scrimmages during practices?
No. Small group scrimmages are not permitted at this point.
- 4) What specific questions should coaches ask players during 'screening' of players before training?
The following screening questions should be administered to players before training sessions:
 - 1) Have you had close contact (within 6 feet for at least 15 minutes) in the last 10 days with someone diagnosed with COVID-19 or COVID-19-like symptoms, or has any health department or health care provider been in contact with you and advised you to quarantine?
If Yes -> The player/coach should not participate. If the individual never displayed symptoms during daily monitoring, the individual can return 10 days after the last time they had close contact with someone with COVID-19), or as listed below.
If No -> The player/coach can participate if they are not experiencing symptoms.
 - 2) Have you had any one or more of these symptoms today or within the past 24 hours, which is new or not explained by another reason? Since you last played, have you had any of these symptoms?
 - Fever or chills
 - Chills
 - Shortness of breath or difficulty breathing



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- New cough
- New loss of taste or smell
- Fatigue
- Muscle or body aches
- Headache
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

If a player has any of these symptoms, they should go home, stay away from other people, and have a parent/guardian call their healthcare provider.

- 3) Over the past 10 days, have you had a positive COVID-19 test for active virus? Since you last played, have you been diagnosed with COVID-19?

- Yes
- No

If a player/coach is diagnosed with COVID-19 based on a test or their symptoms, or does not get a COVID-19 test but has had symptoms, they should not play, stay at home, and contact their health care provider.

- 5) If a young player cannot answer the health screening questions before training, what should be done? Should the health screening questions be asked to the parents/guardians?

Yes. Ask the parents/guardians the screening questions. Have parents/guardians and the player remain physically distanced from the coach while answering screening questions. For example, this could be performed while the family is still in the car upon arrival to training.

- 6) Temperature Checks – Should coaches perform player temp checks at the field as well?

It is not necessary. All participants should conduct a daily temperature check before arriving to the field. Players may attend soccer related activities if their measured temperature is below 100.4°F.

- 7) Some fields are only open with MHSAA sports rules. One of these rules requires coaches to take temperatures upon entry to training. Can coaches (masked and gloved) take temperatures (with non-touch thermometers) on those fields requiring it for MHSAA?

It is MSYSA's position that all participants should conduct a daily temperature check for a fever of below 100.4°F at home before training. If a field requires it because of MHSAA requirements, coaches may take a player's temperature given that they are masked and gloved, players are masked, and non-touch thermometers are used.



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- 8) What temperature does MSYSA consider as “having a fever”? Does it depend on the normal body temperature of the individual being tested?
 Any individual with a measured body temperature of at least 100.4°F, or 38°C, is considered to have a fever. This temperature is used in standard medical decision-making.
- 9) Can clubs start running soccer camps now?
 Yes, as long as all participants travel to and from training grounds each day. Camps must adhere to all other MSYSA COVID-19 guidelines, including proper physical distancing, equipment management, play restrictions, hygiene, as well as state and local regulations on large gatherings.
- 10) Has there been any consideration of loosening the spacing requirements on the much younger players during training or youth development programs? Some suggest that the radius of potential spread with younger players is closer to 2 feet as opposed to 6 feet because their lungs are not developed enough to project at the velocity and distance of more developed adolescents.
 Collectively we are still learning more about transmission methods and rates of COVID-19, and much is still unknown. To the extent possible, players should remain 6 feet apart to reduce the transmission of COVID-19. This guidance is from the CDC, MDHHS, and US Soccer guidelines, and is currently not based on player age.
- 11) I had a question regarding the age of the kids in soccer that can or more importantly cannot grasp the “Social Distancing or Special Procedures” required to run a soccer program during COVID. Is it advisable to try to run a youth soccer program this Fall knowing that a 3, 4, 5 or 6 year old may not comprehend or even be able to behave in a manner that is needed to meet the required health protocols?
 Soccer activities should only be performed if organizers, players, parents, and all other participants are capable and willing to adhere to MSYSA, local, state, and federal COVID-19 guidelines, including proper physical distancing, hand hygiene, face coverings, etc. If these guidelines cannot be adequately met by all participants, organizers should consider postponing their programs until they are able to meet these COVID-19 guidelines.

Equipment Management

- 12) Are clubs allowed to distribute training bibs/pennies to players/coaches for training purposes? If so, what protocols should be followed in order to keep all participants safe?
 Yes, clubs are allowed to distribute training bibs/pennies to participants. A healthy coach may lay out clean bibs/pennies for each player, making sure to maintain physical distancing. That player may then keep that bib/pennie for the remainder of the season, making sure to wash it after every practice session and prior to returning to the coach.
- 13) What type of disinfectant should we use to clean soccer balls and other equipment?
 A full list of EPA-approved disinfectants for preventing the spread of COVID-19 can be found [here](#).



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- 14) Is Lysol spray an acceptable disinfectant for shared equipment such as soccer balls, goals, etc.?

Many Lysol products have been approved by the EPA to prevent the spread of COVID-19. You can find a link to all Lysol products that have been approved by the EPA [here](#).

- 15) How does MSYSA define 'facial coverings'?

MSYSA defines 'facial covering' as: a clean cloth, fabric, or other soft or permeable material, without holes, that **covers both the mouth and nose**, including, but not limited to surgical masks, handmade or homemade. Athletes should utilize a facial covering size that comfortably covers both the mouth and nose without noticeable gaps, vents, or holes. Athletes are encouraged to bring more than one facial covering to trainings, practices and games in the event the facial covering is damaged, falls off, gets wet, or is bloodied in any way. **Note: The use of plastic 'face shields' is not permissible as a substitute for facial coverings. Bandanas and gaiters are not recommended as they do not provide adequate protection for the wearer or others.**

Risk Mitigation

- 16) Do athletes have to wear facial coverings during training/competition?

Yes. Athletes training for, practicing for, or competing in an organized sport must wear a facial covering at all times.

- 17) Do coaches have to wear facial coverings during training?

Yes. All participants, including coaches, are required to wear facial coverings at all times during sporting events, including training.

- 18) What is the protocol if someone contracts COVID; who specifically should clubs contact?

Each club should designate a COVID-19 Point of Contact: Designate a program staff person to respond to COVID-19 concerns, such as a coach or other staff member. All coaches, staff, officials, and families should know who this person is and how to contact them.

Parents should notify the coach and the Point of Contact if their child has a documented case of COVID-19, becomes sick with COVID-19 symptoms, or has been exposed to someone with COVID-19 symptoms or a confirmed or suspected case.

If there is a positive case, the local health department should also be contacted by the Point of Contact for further direction. The local health department will likely look to initiate contact tracing for individuals who may have been in close contact with the positive case (within 6 feet for at least 15 minutes from two days before he/she first showed symptoms to the time when he/she was last in contact). All team training and activities should be postponed until the local health department can make a final determination of individuals who need to quarantine due to being close contacts with the positive case. Close contacts should be quarantined at home for 10 days after last contact with the positive case and should not return to soccer activities during that time. Local health officials may identify other contacts who should quarantine.



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Coaches, players, parents, officials, or anyone else in attendance should be notified of the presence of a positive COVID-19 case so that they can monitor themselves for any symptoms. However, **the individual with COVID-19 should not be identified by name to non-family or non-health department officials.**

Areas that were used by the sick person should be closed off and should not be used until they have been properly cleaned and disinfected. Ideally at least 24 hours should pass before the area can be cleaned.

The Point of Contact, parents/guardians, players, and other club members should be prepared to answer questions from their local health department regarding a positive COVID-19 test.

- 19) Scenario: *A club has a player that had a relatively high temp during practice yesterday. Coach was made aware, and the club shut the team down for 14 days starting the last time the players were together. Assuming that the player has no temp today is the club alright to resume team activity?*

Any player exhibiting symptoms or feeling sick should remain away from all team activities and contact their health care provider. However, MSYSA does not require clubs to cancel activities unless there is a confirmed COVID-19 case. If the participant tested positive in this scenario, all other exposed participants should quarantine at home for 10 days from last contact. The COVID-19 Point of Contact should contact their local health department for more direction.

- 20) What should be done if a player was exposed to someone who has been diagnosed with COVID-19, such as a parent, sibling, coach, etc.?

Any participant who is in close contact (within 6 feet for at least 15 minutes from two days before he/she first showed symptoms to the time when he/she was last in contact) to an individual with a confirmed COVID-19 case should remain quarantined in their home for 10 days since their last known exposure to that individual. If the exposed individual begins feeling sick or exhibiting symptoms consistent with COVID-19, they should speak with their healthcare provider and are urged to get a COVID-19 test. Participants must be symptom-free and be removed from quarantine in order to return to training. Any individual exposed to a confirmed COVID-19 case should be prepared to answer questions from their local health department and follow all guidelines set by them. Teams may consider requiring clearance from local health departments or primary care providers prior to participant returning to practice.

- 21) If a participant has been recently exposed to an individual with a confirmed COVID-19 infection, may the participant rejoin activities after showing a negative COVID-19 test result?

Individuals exposed to a confirmed COVID-19 infection should not return to any activities for at least 10 days since the last known exposure to the confirmed COVID-19 case, **regardless of a negative test result.** After an exposure to a confirmed case, it may take a number of days or even longer than a week before an individual starts to show symptoms or begin to feel sick. Many COVID-19 tests taken immediately after exposure falsely show negative test results, so a full quarantine is required even with a negative test result.



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22) What precautions must players take when coming back in-state in order to return to play?

When returning from out of state travel, all participants must monitor their symptoms and avoid participation if feeling sick or if they have a laboratory confirmed case of COVID-19. If any individual is exhibiting symptoms consistent with COVID-19 or is feeling sick, they should not return to practice and should contact their health care provider.

23) Does MSYSA recommend athletes participate in another sport at the same time they are participating in MSYSA during the COVID-19 pandemic?

Participating in multiple sports is acceptable so long as athletes follow all public health guidelines for their respective teams. It is important to understand that being exposed to many different groups of people may increase someone's risk of developing or spreading COVID-19, but proper steps can be taken to minimize these risks.

24) What should an individual do if they are a secondary contact for a COVID-19 case? For example, does an individual have to quarantine if they are in close contact with someone else who is quarantining (not a case) due to a COVID-19 exposure?

Currently the CDC only recommends that individuals who have been in close or direct contact with a COVID-19 case should quarantine. This does not include secondary contacts; individuals who are in close contact with an individual who was in close contact with a COVID-19 case (hence secondary contact) do not need to quarantine unless their contact becomes a COVID-19 case. Then they should quarantine for 10 days since their last known close contact with that individual.

Return to Games/Competition

At this point, games/competition are not permitted per MDHHS Emergency Order (EO). MSYSA will update this stance dependent on future EOs.

Miscellaneous

25) What is the difference between quarantine and isolation?

Isolation separates sick people with a contagious disease from people who are not sick. Quarantine separates and restricts the movement of people who were exposed to a contagious disease and who have the potential to be contagious themselves. These people may have been exposed to a disease and do not know it, or they may have the disease but do not show symptoms.

Isolation: 10 days of complete separation from others, including all family members, typically coordinated by your local health department. Completion is determined by your local health department.

Quarantine: 10 days of separation from others outside the home, typically coordinated by your local health department. Completion is determined by your local health department.



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26) Are MSYSA clubs breaking any HIPAA laws by taking temperatures or asking players to answer a health questionnaire?

No. HIPAA laws refer to healthcare and health insurance providers including hospitals, health clinics, nursing homes, etc.

27) What are the current CDC requirements/recommendations when returning from international travel?

Effective January 26, 2021, the CDC will require all air passengers entering the United States to present a negative COVID-19 test, taken within three calendar days of departure or proof of recovery from the virus within the last 90 days. More information is available on the CDC website [here](#).

The CDC also recommends that international travelers get tested again 3-5 days after arrival **and** stay home for 7 days post-travel (or stay home for 10 days if not tested again upon return to the US).

These travel guidelines are subject to change.