

Toronto Ultimate Club

Safe Return to Play – COVID-19 Prevention Guidelines

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1 Disclaimer

- 1) The purpose of this document is to outline plans, guidelines and procedures in contemplation of a Return to Play, addressing major areas of concern with respect to physical distancing and to provide a certain level of comfort to participants by outlining steps to be taken to help maximize their safety and well-being and allows for any enhanced TUC protocols that we might develop or that the Province of Ontario or The City of Toronto may require of us to rent a facility or venue space.

2 Introduction

- 1) Many parks and services, and as a result sports have been altered or suspended as a part of the Province's and City of Toronto's efforts to mitigate the spread of COVID-19.
- 2) Sport and recreation play a critical role in the social, emotional, physical, and mental well-being of individuals and our wider community. As we seek to restart Ultimate Activity, the items listed in this document are suggestions of recommended guidelines, measures, and safeguards to support our sport in resuming in a safe and responsible way. Members, staff, coaches, parents, and spectators must continue to follow Federal, Provincial and Local Governmental guidelines. Remember that information and recommendations during the pandemic are very fluid and are subject to change.

3 Key Dates

- 1) At this time, we are hoping that we can get on the field on July 13th as a part of the City of Toronto's Phase 2 reopening strategy. We are still planning to have a Summer 2020 season when the City of Toronto enters Phase 3 of the Province's reopening framework. We are anticipating this would begin the first week of August and run through until playoffs in September. This August start date cannot be guaranteed.
- 2) Timing is dependent on the Province of Ontario and the City of Toronto's continued easing of restrictions.

4 Purpose

- 1) To provide operational guidance on the re-opening of TUC activities.

5 Principles

- 1) The following principles were used in the development of these guidelines:
 - a) Safety of our membership – athletes/players, volunteers, employees, parents, and spectators.
 - b) Adherence to all health restrictions provided by municipal (local), provincial/territorial and federal health authorities. Returning to play should only occur if/when restrictions allow for it.
 - c) Phased system for Return to Play. Return to Play should have different phases of activity that progresses as health restrictions permit.



- d) Alignment with our National and Provincial/Territorial Sport Organization's Return to Play guidelines.

6 Strategies for Modifications to Games and Activities

- 1) Games and activities will need to be modified to address restrictions.
- 2) Below are strategies that will be considered and employed throughout the guidelines:
 - a) Physical Distancing. Physical distancing is the most effective way to reduce risk.
 - b) Activity/Game Day Controls. Activity/game-day controls should be implemented to encourage physical distancing, and to improve safety when it is not possible.
 - c) Administrative Controls. Administrative controls and policies should be implemented to educate and create a safer sport environment and guideline compliance.
 - d) Personal Protective Equipment. PPE should be used if there is significant risk and other options are not available.
 - e) Limit time/intensity of contact:
 - i) Any task that can be done at home, should be done at home. Arrive, play/train, leave.
 - ii) Limit the length of the activity/game (i.e. shorter games/training sessions).
 - iii) Avoid/no unnecessary body-contact.
 - f) Reduce the number of contacts:
 - i) Limit group size (ex. Games are smaller than 7v7, likely 5v5, but possibly all the way down to 3v3, small group training sessions).
 - ii) Reduce touch points of equipment and facilities.
 - iii) Reduce shared equipment.
 - iv) Provide added spaces between participant groups/cohorts.
 - v) Control the movement/flow of participants at venues.
 - vi) Move activities and administration online whenever possible.

7 Risk Assessment

- 1) TUC shall assess our events following the Canadian Sport Institute of Ontario's (CSIO) Risk Assessment and Mitigation Checklist Toolset (COVID-19 Risk Assessment Tool for Sport and Club Risk Assessment and Mitigation Checklist Tool, Appendix B). The toolset aides in guiding and assessing risk associated with Return to Play activities, as well as provides guidance and strategies on mitigating risk.
- 2) This CSIO tool was "adapted from the World Health Organizations (WHO) Mass Gathering Risk Assessment and Mitigation Checklist and the Canadian RATs tool specifically for sport-specific clubs in Canada to conduct risk assessment and mitigation checklist to minimize the risk of COVID-19 transmission when resuming club based training"¹.

¹ Canadian Sport Institute Ontario, 2020, *Club Risk Assessment and Club Mitigation Checklist Tool, Appendix B*, <https://csiontario.ca/csio-resources/return-sport-group-training-risk-assessment-dr-doug-richards>



8 Administration and Policies

- 1) Administrative changes and policies are applicable at all phases of Return to Play.
- 2) Identify a lead staff member or volunteer responsible for TUC's Return to Play strategy and implementation. This person should ensure that the plan is being implemented in accordance with health restrictions for the community and may need to reach out to municipal coordinators.
- 3) Develop and implement policies and procedures to address sickness. Key elements to be considered:
 - a) Participants (Members, coaches, captains, staff, etc.) must agree to **not play** if:
 - i) They have symptoms of COVID-19,
 - ii) They have been out of the country or province within the last 14 days, or
 - iii) they have been in contact with someone who has COVID-19 and they have not been tested.
 - **Exception:** Health Care Workers. A Health Care Worker includes health professionals and other workers in clinics, home and community care, health care facilities, and institutions who may be in contact with patients, residents, inmates, or other co-workers. Examples of Clinics, health care facilities, institutions and professional organizations include but are not limited to: primary care offices, hospitals, Long-Term-Care facilities, retirement homes, police stations, fire departments, and public health units.
 - b) Waiver/declaration or participant agreement (for under 18 that includes parent/guardian signature) that participants should read and accept before every TUC session they attend.
 - c) Create an Emergency Action Plan for what to do if a participant shows COVID-19 symptoms. It should include:
 - i) How and where to isolate the individual who may become ill on-site.
 - ii) Steps coaches, captains and administrators take if someone shows COVID-19 symptoms.
- 4) All policies and procedures should be well communicated to participants and available on TUC's website.
- 5) Develop Return to Play requirements for someone with COVID-19. This could include a doctor's note and or meeting the provincial criteria for a recovered case.
- 6) Take attendance at all in-person events to support contact tracing should a participant contract COVID-19. This may involve added staff or volunteer support at venues.
- 7) Create a process to advise/notify participants if there is a positive case of COVID-19 within the community while maintaining a privacy-first approach.
- 8) Develop coaching plan to address Rule of 2 considering changes to programming and level of risk.
- 9) Reduce in-person meetings (staff meetings, board of director's meetings, captain's meetings, etc.) and hold them virtually or by phone whenever possible.



- 10) Reduce or eliminate cash transactions and move to online payments or no touch payments.

9 Participant Education and Communication Program

- 1) Ensure that all participants (athletes, coaches, officials, parents, and spectators) are aware of Return to Play protocols and requirements. This affects all phases of Return to Play.
- 2) Parents, participants, and coaches must be aware of all new guidelines, protocols and requirements. This could be done through clinics, webinars, or the distribution of documentation.
- 3) Participants must agree to new policies around sickness and any new participant requirements for programs. All participants should be screened at the start of each session.
- 4) Promote hygiene protocols. Hygiene protocols should be promoted online, in emails, and with posters at venues (if possible). Key items:
 - a) Hand washing,
 - b) Keep cough/sneeze covered,
 - c) Avoid touching own face,
 - d) And team disc/equipment sanitization.
- 5) Participants should bring their own equipment as much as possible and not share with others. This includes:
 - a) Water bottles,
 - b) Jerseys,
 - c) Footwear/cleats,
 - d) Sunscreen,
 - e) And hand sanitizer.
- 6) Promotion of training best practices. Training best practices should be promoted online, in emails, and with posters at venues (if possible). Key elements: "Arrive, train/play, leave" and at the first sign of symptoms to isolate immediately.
- 7) Promotion of modifications to game play and venues (varies by phase of Return to Play and local restrictions). Should be promoted online and through direct emails.
- 8) Participant programming during Return to Play is optional and will not be considered in determining future participation in programs.
- 9) Resources for vulnerable groups and what they should review before considering Return to Play.

9.1 Employee and Volunteer Training

- 1) Train employees and volunteers (coaches, captains) around requirements. This is relevant at all phases.



- a) Education on hygiene, sanitation, recognize symptoms, proper hand washing, and new policies.
- b) Have a policy around sickness that should also address employees and volunteers who are sick.
- c) Clean common equipment between different people using (i.e. discs).
- d) Hold meetings by phone/online whenever possible.
- e) Update volunteer/staff roles to enforce new policies.
- f) PPE available for tasks that are higher risk (if required).

10 Venue Protocols

- 1) Venue protocols for training and competition venues that are relevant at all phases. Overall goal is to limit contacts and follow the "Arrive, Train/Play, and Leave" model.
 - a) Consider participant flow and traffic corridors when determining site plans. Establish separate entrance and exit points for participants whenever possible and avoid having areas that encourage congregation.
 - b) Transportation protocols and expectations that are in-line with public health restrictions should be communicated to participants to address transportation to venues or as part of a program.
 - c) Stagger training and game start times to reduce on-site congestion for traffic corridors.
 - d) Install signage outlining physical distance guidelines if possible (this will be the responsibility of the Venue Provider as we are on public spaces).
 - e) Congregating in parking lots is not permitted.
 - f) Limit access time for teams. Have a set time for when teams/participants can arrive to the venue that is suggested to be no more than 10 minutes before a session begins.
 - g) If multiple user groups use a facility in a day, ensure there is sufficient time between groups to limit contact between user groups/cohorts.
 - h) Create a handwashing plan for the venue. This could be providing coaches/captains with a starter kit of sanitizing supplies or advising participants that they need to bring their own hand washing/sanitizing supplies.
 - i) Reduce facility use and sharing. No community use of showers and limit access to any indoor offices or clubhouses to meet physical distancing requirements.
 - j) Ensure proper distancing between fields. This may include the removal of common sidelines and added buffer space between fields to support physical distancing.
 - k) Limit number of participants on-site to meet public health restrictions.
 - l) Limit number of volunteers such as assistant coaches, extra medical staff, etc. per team.
 - m) Limit the number of spectators allowed. Consider age group when limiting spectators.
 - n) Have an on-site staff or appointed volunteer to greet participants. Their role is to screen participants for COVID-19 symptoms and receive acknowledgement that they are symptom free and have not travelled outside of Canada/Ontario in the last 14 days, and to remind all participants about physical distance requirements.
 - o) If possible, establish specific space for each person's gear on the sideline that respects physical distancing guidance.



11 Participant Protocol Modifications

- 1) Below are suggested game play and training modifications:
 - a) Coaches, Captains, Volunteers and Players
 - i) Physical distancing must be respected at all times outside of the game/training environment.
 - ii) Arrival times and departure times should be prescribed for players to limit people at venues.
 - iii) Arrive ready to play; change/shower at home.
 - iv) Bring your own water bottle (pre-filled) and identify it with your name.
 - v) No food/beverages on-site; eat and drink off-site.
 - vi) Build in handwashing breaks for training. Mandatory handwashing before, at half time and at end of each game/training session.
 - vii) Sanitize discs at every opportunity. At a minimum before; at half time; after each game. For training sessions, discs can and should be sanitized more frequently.
 - viii) No unnecessary body contact (high fives, hand shaking, fist bumps, spirit circles, etc.).
 - ix) Bring own sanitary wipes/hand sanitizer.
 - x) No spitting or nasal clearing onto the grass/ground.
 - b) Coaches
 - i) Maintain physical distancing with participants.
 - ii) Consider wearing a mask for activities if physical distancing is challenging or is recommended by your provincial/territorial, or local public health authority.
 - c) Sideline
 - i) No walking up and down sideline. Participants must stay 2 meters apart and in the designated space.
 - ii) Teams/training groups to set up on opposite sidelines when possible to increase space.
 - d) Spectators
 - i) No spectators
 - **Exception:** Junior Programming. Parents/guardians to keep physical distancing at all times. Encourage one (1) parent/guardian per child/household for participants under 18 years of age. Please note that parents/guardians are considered in the participant numbers for gathering sizes.
 - e) Volunteers
 - i) On-site volunteers to keep physical distance and position themselves at least 2 meters from participants.

12 Phases of Return to Play

- 1) The following are suggested phases for Return to Play. Some important notes:
 - a) Phases should not be implemented unless they meet all local, provincial/territorial, and federal health restrictions.
 - b) A phase could vary within a province or territory based on health restrictions.
 - c) A phase could be skipped or have a short length if health restrictions allow.
 - d) Phase 1 is the base phase with modifications added to each subsequent phase.



12.1 Phase 1: Small group training

- 1) This first phase focuses on training and skill development in small groups. Activities will be related to skill development and will not include formal competition that could result in contact. Elements include:
 - a) Organizational protocols addressing administration and policies, participant education programs, employee and volunteer protection and training, venue protocols, and participant protocol modification (items 1-5 above) must be established.
 - b) Sanitization procedures for equipment (cones, discs, etc.) used need to be established and communicated with 1 individual in charge of shared equipment. This could include limiting who touches equipment, like cones, and who is responsible for bringing and sanitizing discs.
 - c) Attendance must be taken and recorded at all sessions.
 - d) Maintain physical distancing (2 meters) at all times.
 - e) Number of participants permitted in a training group and participant to space ratios need to be established based on local health rules. Ideally there should be 10 or under in a small training group.
 - f) Participants should all be from local community and only train with 1 training group within the sport.
 - g) Throwing and catching of discs between participants is only permitted if local health regulations permit.
 - h) Training should all occur locally.
 - i) Training in small groups is only appropriate for those who can maintain physical distancing. As a result, it may not be appropriate for some participants, like small children.
 - j) No spectators permitted
 - **Exception:** Juniors. Athletes/participants under 18 years of age can have one (1) parent/guardian present per child/household.

12.2 Phase 2: Large group training

- 1) The second phase expands the training group and would allow for a more traditional practice to be held with a local group. The requirements from phase 1 are still in effect, except for the following changes.
 - a) Physical distancing requirements can be relaxed during some training activities but must be maintained while not actively training. Planning should be made to minimize activities with relaxed physical distancing and modifications considered to add some physical distancing in other activities (example: 1m away for a mark instead of a disc space).
 - b) Number of participants permitted and participant to space ratios will increase but must adhere to local health rules.
 - c) No scrimmages.

12.3 Phase 3: Competition within the club

- 1) The third phase expands on the training group that allows for scrimmages to take place. Changes from phase 2:



- a) Scrimmages and games are now permitted.

12.4 Phase 4: Regional or Provincial competition

- 1) The fourth phase expands on phase 3 to now permit competition in a larger geographic area.
 - a) Training and competition can now be regional or provincial.

12.5 Phase 5: National

- 1) The fifth phase expands on phase 4 to allow for inter-provincial travel.
 - a) Training and competition can now occur interprovincially.

12.6 Tools and Ideas to Meet Health Restrictions (Mass Gathering Sizes)

- 1) **Game play or training permitted, but limitation on size restricted.** Below are some options if game play or training are permitted, but there are restrictions on the number of people who can be in attendance:
 - a) Reduction or ban on spectators
 - b) Reduce number of staff or volunteer at venue
 - c) Reduce or limit roster size
 - d) Operate smaller-sized competition (5-on-5 or 4-on-4)
 - e) Split venues with sufficient spacing that there are independent events

13 Tournaments and Events

- 1) Tournaments and events will require that sufficient health restrictions are lifted that the total number of participants involved does not exceed health restrictions. This is going to be a longer-term change. Should tournaments or events be permitted, the following guidelines are suggested:
 - a) Safety plan for someone who falls ill. Spaces for someone to go to if they are unwell and need to isolate.
 - b) No field food.
 - c) Potentially reduce number of contacts by reducing games and increasing time between games.
 - d) Potentially reduce intensity of contacts by reducing game times.
 - e) Physically keep teams in certain areas or in certain times (i.e. morning or afternoon).
 - f) Frequent cleaning of high touch areas (tournaments: tables, draw boards, scoreboards, etc.)

14 Toronto Ultimate Club Guidelines and Protocols

14.1 Infection Prevention and Control Measures

The following mitigation guidelines will help to reduce the risk and spread of respiratory infections including COVID-19.



14.2 Guidelines: Before Arrival

- 1) **Screening** – Individuals must screen themselves to limit the introduction of infection:
 - a) Prior to leaving for the field, all participants (coaches, players, spectators, captains, etc.) are to complete a Wellness Check and if they do not pass the wellness check, they should remain home, and contact Telehealth Ontario (1-866-797-9000), their health care provider or visit the [City of Toronto's website](#) to determine if further care is needed and learn about [assessment centres](#).
 - b) All participants should be aware of [signs and symptoms of COVID-19](#), including:
 - i) Fever
 - ii) Cough
 - iii) Difficulty breathing
 - iv) Muscles aches
 - v) Tiredness
 - vi) Sore throat
 - vii) Headache
 - viii) Runny nose (not associated with known conditions like seasonal allergies, postnasal drip, etc.)
 - ix) New loss of taste or smell
 - c) The World Health Organization (WHO) advises that symptoms may appear in as few as 2 days or up to 10 to 14 days after contracting COVID-19. Those who are infected with COVID-19 may have few or no symptoms. Therefore, there is a possibility of asymptomatic and pre-symptomatic spread of COVID-19.
- 2) **Entrance Restrictions:**
 - a) Access to the field will be granted by the activity leader (TUC staff, captain, coach) after an “on-arrival” wellness screening and the completion of the Declaration of Compliance.
 - b) Anyone who is exhibiting symptoms of COVID-19 or has had close contact with a confirmed case in the last 14 days or who has travelled outside of Canada or the Province of Ontario in the last 14 days cannot enter the field.
 - **Exception:** Health Care Workers
 - i) Participants who are denied entry per item b) above, will be advised to go home immediately (in a private vehicle if possible), self-isolate, and contact Telehealth Ontario (1-866-797-9000), their health care provider or visit the [City of Toronto's website](#) to determine if further care is needed and learn about [assessment centres](#).
 - c) Access to the field will be restricted to activity leaders (coaches, captains), ultimate players and parent/guardians of our junior ultimate players.
 - d) Lessons and clinics will be limited per session based on provincial/territorial and local public health restrictions on social gathering sizes.
 - e) Under advisement of the Medical Officer of Health and Toronto Public Health (TPH), the City strongly encourages all participants 70+, and or with weakened immune systems to remain home.
 - f) All participants at the entrance will be required to sanitize their hands before heading to the sideline of the field.



14.3 Guidelines: During Play

1) Reduce the risk of transmission during activities:

- a) Stay at home when you are ill (Pre-departure Wellness Screening)
 - i) The Wellness Screening will be available via the Javelin App, which is linked to TUC's Zuluru attendance feature.
- b) Practice physical distancing and maintain two (2) metre distance from others when at the field (parking lot, Wellness Screening check, on the sidelines, during training).
- c) Respect any Provincial Emergency Orders that prohibit social gatherings of a certain size, including the current gathering limit of 10 people physically distanced per the City of Toronto's guidance.
- d) Participant attendance records must be kept to help support potential public health contact tracing as needed/required.

2) Practice proper hygiene and respiratory etiquette:

- a) Wash your hands often with soap and water for at least 15 seconds.
- b) If soap and water is not available, use alcohol-based hand sanitizer.
- c) Cover your cough or sneeze into a tissue. Immediately throw the tissue in the garbage and wash/sanitize hands.
 - i) If there is no garbage receptacle on-site, collect your personal garbage/trash in a plastic bag and bring it home with you for disposal.
- d) If you don't have a tissue, sneeze or cough into your sleeve/arm.
- e) Avoid touching your face, nose and mouth with unwashed hands.
- f) Players may wear face coverings (they are welcomed and encouraged), but not mandatory.

3) Participants who become ill with signs and symptoms of COVID-19 while playing/on-site:

- a) Activate TUC's Emergency Action Plan (EAP) COVID-19 Medical and Public Health Response Procedure for the specific venue:
 - i) Participants (staff, players, coaches, captains, spectators, etc.) who become ill at the field will be isolated and removed from the activity/event.
 - (1) TUC will designate area at each field for isolation purposes.
 - ii) The activity/event will be shutdown while:
 - (1) Equipment (discs) are cleaned and sanitized,
 - (2) Participants sanitize their hands.
 - iii) The Activity Leader (coach, captain, TUC staff) will advise the unwell participant to don a face covering or mask (if available) on their exit from the field.
 - iv) The Activity Leader (coach, captain, TUC staff) will advise the unwell participant to go home immediately (in a private vehicle if at all possible) and self-isolate, and contact Telehealth Ontario (1-866-797-9000), their health care provider or visit the [City of Toronto's website](#) to determine if further care is needed and learn about [assessment centres](#).
 - (1) If leaving the field can not be done immediately (waiting for a private vehicle, or a parent/guardian), the participant will remain in the designated isolation area.



- v) The Activity Leader (if not TUC staff), will advise TUC staff, so that the club can follow-up with the unwell participant, and aid public health authorities with potential contact tracing in the event the unwell participant tests positive for COVID-19.
- b) If a TUC member at any TUC activity/event tests positive for COVID-19, their local public health unit (Toronto Public Health for Toronto residents) will follow-up with close contacts, who may include other TUC members. Other TUC members who came in close contact with the infected participant may be required to self-isolate.
 - i) TUC will maintain an attendance listing record and advise participants if they have been in contact with a member who has tested positive for COVID-19 and to contact Telehealth Ontario (1-866-797-9000), their health care provider or visit the [City of Toronto's website](#) to determine if further care is needed and learn about [assessment centres](#).
 - **Note:** The privacy of TUC members will be maintained; participants who may have been in close contact with a positive COVID-19 case will **only** be advised that someone at the training session/game has tested positive.
 - ii) COVID-19 positive cases, can only return to play after:
 - (1) A doctor's note is provided and received by TUC leadership.
 - (2) Or the local public health authority/unit has advised that the individual is considered recovered per Ontario/Toronto Public health guidelines and cleared to return to play/work.

14.4 Guidelines: Sports Fields and Multi-Use Fields and Adjacent Amenities

- 1) The following guidelines are from the City of Toronto regarding the use of their Sports Fields and Multi-Use Fields and adjacent amenities:
 - a. Nearby facilities (community centres, drinking fountains, public washrooms) may be closed.
 - b. City of Toronto Sports Fields and Multi-Use Fields will not be sanitized, including but not limiting to:
 - i. Net/Goal Posts/Uprights
 - ii. Wickets
 - iii. Practice cages
 - iv. Backstops/Dugouts
 - v. Lighting
 - vi. Benches
 - vii. Bleachers
 - viii. Seating
 - ix. Fences
 - x. Gates
 - xi. Water fountains
 - xii. Other apparatus
 - c. Sports Fields and Multi-Use Fields participants are advised to practice good hand sanitization/hand hygiene while using any part of the Sports Fields and Multi-Use Fields.
 - d. Fountains and water bottle filling stations may be closed, and patrons are asked to bring their own pre-filled water bottles.



- e. Participants are asked not to loiter around the Sports Fields and Multi-Use Fields to assist in physical distancing and allow others the opportunity to utilize amenities.
- f. Locker rooms, change rooms, showers, concession stands, storage and clubhouses in the facility should remain closed, except to the extent they provide access to a washroom or a portion of the facility that is used to provide first aid.
 - i. If Washroom facilities are available, they will be cleaned as per Toronto Public Health Guidelines.

14.5 Guidelines: After and Upon Departure

- 1) Upon completion of the activity/event/game, participants are asked to place their garbage into the receptacle if there is one on-site or into a plastic bag if a receptacle is unavailable and dispose of your personal garbage at home.
- 2) Participants will sanitize their hands prior to departure.
- 3) Activity leaders (captains, coaches, etc.) will sanitize equipment (cones, discs) prior to departure.
- 4) Participants will be advised to leave the field through the designated entry/exit point maintaining physical distancing of 2-metres.
- 5) Participants will not congregate in the parking and leave immediately.

15 Updated TUC Policies and Forms

- 1) The following TUC Policies have been updated with COVID-19 specific amendments:
 - a) [Bad Weather Policy](#)

16 Resources

- 1) Ultimate Canada Return to Play Guidelines
- 2) [Canadian Sport Institute of Ontario, Club Risk Assessment and Club Mitigation Checklist Tool, Appendix B](#)
- 3) [Ministry of Ontario Self-Assessment Tool](#)
- 4) [City of Toronto COVID-19 Screening Survey](#)
- 5) [City of Toronto Guidelines for Permitting Sports Fields/Multi-Use Fields During COVID-19, City of Toronto, July 3, 2020](#)
- 6) [Workplace Safety & Prevention Services Guidance on Health and Safety for Outdoor Recreation and Drive-in/Drive-Thru Entertainment Settings during COVID-19, Workplace Safety & Prevention Services](#)
- 7) [Health and Safety Guidance During COVID-19 For Parks & Recreation Employers, Public Services Health & Safety Association.](#)



- 8) [COVID-19: Precautions When Working As A Parks & Recreation Worker, Public Services Health & Safety Association.](#)
- 9) [COVID-19 \(Coronavirus\) and Workplace Health and Safety, Government of Ontario, updated June 26, 2020](#)
- 10) [Develop your COVID-19 Workplace Safety Plan, Government of Ontario, updated June 23, 2020.](#)
- 11) [COVID-19 Guidance: Summer Day Camps, Ministry of Health Ontario, Version 2 – June 28, 2020.](#)
- 12) [COVID-19: Guidance for Day Camps, Toronto Public Health, June 15, 2020.](#)
- 13) [COVID-19: Precautions When Working in Day Camps, Public Services Health & Safety Association.](#)

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