
RETURN TO PLAY PROTOCOLS: PRINCIPLES & GUIDING QUESTIONS

GENERAL INFORMATION BY FIFPRO*¹

¹ This briefing document focuses on the return to play and will be continuously updated as the situation is developing and as further scientific evidence is available. Specific considerations on return to play protocols for female players are currently being researched.



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The following background document is part of the ongoing work of FIFPRO to analyse the impact of the severe acute respiratory syndrome coronavirus 2 (hereafter referred as COVID-19) caused by SARS-CoV-2 on the football industry and in particular on professional players.²

CONTEXT

The global spread of COVID-19 constitutes a public health emergency of international concern. In order to reduce the human-to-human transmission of COVID-19, public health measures have been implemented from March 2020 in almost all countries, including travel restrictions, prohibition of events and mass gatherings, home isolation for most employees and social distancing. Accordingly, most ongoing continental and domestic football activities (collective training and competitions) were ceased.

RETURN TO PLAY

While the COVID-19 emergency period heralds a time of major uncertainty for the football industry, all stakeholders are working on gradual return to play scenarios to resume training and competitions in the upcoming weeks or months. Player unions will be at the forefront to protect the health and safety of players during that process.

Countries are planning ahead and started to develop exit strategies to return to a 'new normal' after an extensive period of public lockdown. While it is generally expected that drastic measures will be lifted gradually certain restrictions are likely to remain in place for a longer period of time.

For the football industry, this means not only to developing detailed plans to resume football activities but to consider how training and match operations can be resumed under what some people might consider a 'new normal'. In essence, the football industry will need to drastically re-think training and match operations for a period of time. We need to re-think every aspect that we have taken for granted in our daily routine concerning the operations of professional football.

Players are by far not the only ones being exposed by return to play scenarios. Specific considerations must without a doubt include club staff, match officials, third-parties and the general public. However, there is also no question that players are at the center of any return to play protocols as they are exposed to specific risks in both training and competition environments.

Any return to play scenarios for training and competitions must be developed in coordination with the player unions and in close consultation with players. If minimum requirements for return

² Specific information on legal, football regulatory and economic impacts as well as the specific impact on women's football have been addressed in separate briefing documents.



to play cannot be guaranteed by clubs and competition organizers footballing activities cannot resume in order to protect the health and safety of everyone involved, including the public.

FIFPRO is currently engaged in expert dialogue with the World Health Organization, independent medical experts, player union officials from other sport codes and especially international football stakeholder bodies in an effort to establish common best practice and guidelines for domestic application.

APPLICATION OF PUBLIC REGULATION

Background: Public health measures are different from one country to another. Even within countries, regulations may differ from region to region. It is clear that the football industry must follow the regulatory requirements in each country to ensure an effective containment of COVID-19 in our society. However, current regulations often allow different interpretations and applications across different industries and commercial activities. This fragmented approach can also be experienced in its application and interpretation by the football industry between and within countries.

Considerations for Player Unions & the Football Industry: All football stakeholders are currently working at the national and international level on return to play protocols for a range of different scenarios. Every stakeholder in the football industry recognizes the economic cost COVID-19 is causing across the value chain of the game. It is therefore a priority for everyone to consider all possibilities under which the football industry could return to play. However, the economic need to return to play cannot be forced against the priorities of public health requirements and the guarantee for the health and safety of players, team staff, match officials, security and other partners who are essentially required to return to play (for training or competitions). The situation and timelines to gradually lift current restrictions of public life and the economy are country specific. It is therefore a task for national football stakeholders to identify tailored return to play protocols at domestic level.

Guiding questions: While each return to play protocol needs to be agreed at domestic level, there are guiding questions and principles for the cooperation with public institutions.

- How are football stakeholders coordinating their return to play scenarios with public institutions?
- Is there a written agreement with the public regulator identifying under which conditions training or competitions can be resumed?
- Can the public regulator ensure the same conditions for clubs and players across the country/competition? Are there specific measures in some regions which might create uneven conditions between teams and players?
- What are the minimum health safety conditions required by the public regulator? Can they be guaranteed by employers and competition organisers in the football industry?
- Are there any restrictions on team travel?



FOOTBALL & PUBLIC HEALTH PRIORITIES

Background: The fight against COVID-19 and the protection of human life has priority above everything else. The football industry is one amongst many industries who is working tirelessly to find save and adequate ways to gradually resume parts of its operations. This can only be done in close cooperation with public regulators to ensure that any of the measures which are required to return to play do not impact the capacity and resources needed to prioritize the fight against COVID-19 and to protect human life.

Considerations for Player Unions & the Football Industry: The potential impact of gradual return to play requirements on public health priorities can only be assessed with a clear and detailed understanding of the operational requirements to guarantee a safe environment to return to play for either training or competition. The health and safety conditions do not only apply to players, team staff, or other match officials but also to broadcasters and other third parties as well as the general public which might be impacted by travel or mass gatherings in bars or other places.

Guiding questions: Football operations might impact public health priorities and regulation in particular across the following key areas: testing, travel and mass gatherings.

- Return to play protocols (inc. group trainings or official matches) likely require real time monitoring and/or testing of players, relevant staff or third parties. Are such testing requirements impacting the testing capacity needed for more important medical priorities?
- Can public regulators and competition organisers' guarantee a safe travel regime on match days for teams and the wider public?
- Do official matches behind closed doors pose a risk to other public regulations to prevent mass gatherings?

TESTING REQUIREMENTS & CAPACITY

Background: Reliable and valid real time testing capacities on COVID-19 are not available yet. While medical and health specialists around the world are working on developing new testing methods, countries are also focusing to increase testing capacities. For the football industry, reliable and valid real time testing capabilities are crucial to guarantee the health and safety of players and staff in what constitutes a close contact and high intensity sport. For players to resume training and to enter official competitions requires regular testing at large scale. While certain risks and uncertainties might even not be excluded in such scenarios, clubs and competition organisers must guarantee a high level probability, based on hard evidence and not anecdotal information, that players and involved staff are not infected by COVID-19. Such a testing regime will require considerable resources and testing capacities which must be coordinated with public authorities. As much as players want to return to play, this cannot go at the expense of their own health or wider public health requirements.



Considerations for Player Unions & the Football Industry: At present time, the testing modalities (from laboratory testing with nose/throat swabs and blood sample to chest imaging) are constantly evolving, while their accuracy, validity and turnaround time remain suboptimal: (i) most of the testing modalities show a lot of false negatives (one tested negative but have the disease) and a lot of false positives (one tested positive but do not have the disease), and (ii) it seems that the accuracy and validity of some testing modalities is not stable but depend for instance of the time of testing and the swabs' quality. This makes the football approach to testing very challenging, especially knowing that testing capacity in most countries is not matching the clinical needs for the sickest patients or health care workers. Evenmore, the consequences once a player is tested positive are significant as a large team of health workers will need to trace the contacts of this player who was tested positive. In order to not spread the virus further, such a player needs to be put into quarantine or isolation, as well as anyone who has come into contact with this player in the previous days.

Guiding questions: While testing requirements and capacity needs to be discussed and agreed at domestic level, some guiding questions and principles should be considered.

- What are the testing modalities available? What is the accuracy, validity and turnaround time of these testing modalities according to the public regulator?
- Is there a approach for testing defined by the public regulator?
- Is there enough testing capacity for professional footballers and staff?

RETURN TO TRAINING

Background: Although players are young and have a better health than the general population, and therefore are at lower risk for severe disease such as COVID-19, principles for the process of return to training should be applied in order to prevent the transmission of COVID-19 and thus protect players and their entourage. Preventing the transmission of COVID-19 within clubs and teams is also important to minimize the further interruption in training and the adverse effects that it could have on players' physical capacity (e.g., endurance, speed, strength).

Considerations for Player Unions & the Football Industry: Football teams have developed a fragmented approach to return to training so far. While in the first weeks of the COVID-19 pandemic training in most countries was entirely suspended, some teams have now resumed training in groups between two to six players. The exact training regimes differ within domestic leagues and between clubs. In order to guarantee the same health and safety standards as well as to ensure a level playing field and equal opportunities for competitions, it is advisable to try to harmonize approaches as far as possible. The following guiding principles and considerations are relevant when developing specific standards to return to training.

- Training load: prolonged and strenuous training seems associated with temporary immune system depression that might last hours to days. Therefore, a conservative approach should be taken and training load should be limited first (e.g., duration: 60 minutes max, intensity <80% VO₂max) and gradually increased.



- Maintenance of public health measures by players and their entourage such as hygiene (hand, facilities, gear), social distancing (within clubs and team as much as possible) and in-home isolation/quarantine in case of the presence of clinical signs and symptoms.
- Monitoring clinical signs and symptoms: the presence of fever (>38 degrees Celsius), cough, shortness of breath and unexpected or uncommon fatigue and muscle pain should be monitored daily by the medical team. Any players or entourage members presenting any clinical signs or symptoms must remain in-home isolated. Anyone who had close contact with the symptomatic player (within 2 meters) in the preceding 14 days should start with in-home isolation. During this period, these in-home isolated individuals should report to the medical team.
- In case of recovery, that means at least 24 hours free from any clinical signs or symptoms, in-home isolation is discontinued and the given player can gradually return to training.
- COVID-testing: in most countries, testing capacity is not matching the clinical needs, while the accuracy, validity and turnaround time of the available tests is only moderate. In case of worsening of any clinical signs and symptoms, the given player is tested with an accurate and valid test (e.g., polymerase chain reaction test, serological test, chest computed tomography scan).
- COVID-testing: The cost of COVID-19 testing cannot allow for lower health and safety standards for teams with less financial resources. A harmonized framework which identifies minimum requirements for player testing should be identified.
- COVID-19 negative: in-home isolation is discontinued and the given player can gradually return to training.
- COVID-19 positive: while the symptomatic management of any players tested positive should start immediately, anyone who had close contact with the positive player (within 2 meters) in the preceding 14 days should start with in-home isolation. During this period, these in-home isolated individuals should report to the medical team, while further testing might be requested.

Guiding Questions: The following questions should be considered in this context.

- Is the medical staff at the club trained and available to protect players concerning the specific requirements needed in the context of COVID-19?
- Is there a unified protocol setting standards for return to training across the competition and applicable to all teams?
- Can the minimum health and safety requirements be guaranteed across all teams and training facilities?
- Is there a unified approach to testing (including the impact of costs occurred by regular testing requirements)?
- What are the necessary arrangements required at training facilities?



REQUIREMENTS FOR MINI PRE-SEASON

Background: In most countries, the COVID-19 emergency period leads to several weeks of detraining. Detraining refers to the partial or complete loss of training-induced adaptations ((over)load-recovery-adaptation) as a consequence of either the cessation of training or a substantial decrement in the training load. Before any return to competition, it remains essential that players are provided with sufficient time to retrain so that they can return safely and optimally to competition.

Considerations for Player Unions & the Football Industry: While teams have returned in some parts to light training regimes, the current situation is far from what is required before players could resume official matches. Any gradual return to play protocol has to foresee a period for a condensed pre-season format which includes high intensity group training. The following guiding principles and considerations are relevant when developing specific standards for training regimes.

- At least 3 weeks of preparation is provided to players in order to retrain optimally football specific endurance, speed, strength and coordination.
- The duration, frequency and intensity of training sessions should gradually increase, considering the potential temporary immune system depression within the COVID-19 emergency period.
- Physical tests similar to those used in the pre-competition period might be used to assess the level of physical fitness of the players. Particular attention should be given to essential elements related to injury prevention (e.g., hamstring to quadricep ratio).

Guiding Questions for Player Unions: The following should be considered in this context.

- What are the necessary standards to ensure safe training camps?
- Can groups of players stay in closed rooms for fitness and weight training?
- Do players have access to medical support and post-training treatment?
- What are the requirements for friendly matches? Do the same standards apply as for matches played behind closed doors?

RETURN TO COMPETITION (BEHIND CLOSED DOORS)

Background: The return to competitions, considering public health regulation, is the main priority of the football industry. In a first step, competitions will only be able to resume behind closed doors, as some governments have already announced prohibitions of mass-gatherings until e.g. September 2020. As to when this will be possible, it is country-specific and different scenarios have to be calculated and prepared. Even the return to competitions at domestic level behind closed doors poses a range of challenges for competition organisers, participating teams, players, third-parties and public regulators.



Considerations for Player Unions & the Football Industry: Matches behind closed doors suggest at first that only a limited number of people will be in the stadium. However, the logistics of match day operations in a professional league require substantial staffing – even if played behind closed doors. It is difficult to generalize as the number depends on the football market and the specific competition. However, even if kept to a minimum, the following staff will be required: full first team squad, team staff (coaches, medical team etc.), match officials (referees, league representatives), medical staff, security, media and broadcast personnel. Even if this number is reduced to an absolute minimum in some leagues, it will be difficult to reduce the overall participants below 60 (without media and broadcasting). In addition, match day operations will require extensive travel from third parties, match officials and of course the away team. As a consequence of this, some leagues are starting to analyse the feasibility of centralized completion of league fixtures by all teams in a fixed amount of locations, including long-term quasi team-quarantines. The following guiding principles and considerations are relevant when developing specific standards to return to competitions.

- Dedicated monitoring and/or testing protocols for all personnel entering the stadium;
- Detailed travel guidelines for away teams and third parties;
- Development of protocols and operational standards for broadcasting requirements, and other media operations;

Guiding Questions for Player Unions: The following should be considered in this context.

- Can the competition guarantee a consistent application of all relevant protocols across all venues and teams?
- Could it be considered to play matches in fewer venues to guarantee the same safety standards and to limit travel? What would be the consequences for family life and wellbeing of players?
- Are there any concerns or open questions unanswered?
- Have players voiced health & safety concerns?
- How are staff and personnel trained and educated on new protocols?
- Are there concerns about a potential negative impact on public health priorities?

INSURANCE OF PLAYERS

Background: Player insurance protects players from a range of game related incidents. In addition, player insurance can also cover other day to day risks and diseases. However, the situation might be unclear in certain cases if existing insurance schemes also cover COVID-19. Therefore, it is advised that players and employers clarify the medical insurance coverage before returning to training or official matches to ensure sufficient COVID-19 coverage. It is also unclear at this moment if people who recovered from a COVID-19 infection carry any long term or future risks for their health. Insurance schemes must also consider long term health impacts due to COVID-19 infections which might prevent players from duly exercising their profession. Any return to play protocols need therefore to consider special medical testing



requirements to check players before returning to play. This has to be done in coordination with public institutions and health experts considering the general availability of testing capacities.

Considerations for Player Unions & the Football Industry: Terms of insurance policies must be carefully scrutinized, particularly given the very likely situation that the return to training and play will take place while the COVID-19 public health measures are still in place, either to their full extent or in a transition period. Additionally, the season will probably extend past the original fixed dates and special attention shall thus be given to the validity period of already subscribed insurance schemes to ensure that they remain in force for the remainder of the season. It may imply additional costs for clubs or leagues depending on the domestic situation.

Guiding Questions for Player Unions: The following should be considered in this context.

- Is there any specific insurance available?
- What is the extent any period of validity of the current insurance scheme?
- Are players duly informed about this?

TEAM TRAVEL & ACCOMODATION

Background: Return to competitions will require extensive team travel in a short period of time. This also often requires domestic flights, which has become challenging as busy airports can be a common site of person-to-person spread of COVID-19. Also, many countries have imposed travel restrictions (e.g., suspending flights, banning travelers from affected countries, in-home isolation after returning from specific destinations), while some others are also performing entry screening, including measuring body temperature and assessing for clinical COVID-19 signs and symptoms.

In addition, clubs require adequate accommodation for players and team staff during away games. Detailed principles for accomodation regimes must be coordinated with public authorities at national, regional and local level if necessary. The risk exposure of players in hotels and the overall duration of their stay requires specific measures and protocols to ensure that return to play guarantees the health and safety of all playing and non-playing staff while following public health requirements. This is a complex exercise which might require to think outside the box and to re-think match and competition operations we have successfully implemented for decades.

Any international travel and accommodation will pose significantly higher logistic requirements on the competition organizer and participating teams. This poses distinct challenges to continental club competitions as well as other international formats.

Considerations for Player Unions & the Football Industry: Any return to play protocols need to consider special requirements for team travel to minimize risk exposure for teams and the wider public. Teams should consider, where possible, travelling by busses as the environmental conditions and hygiene levels are easier to control. Travelling players (thus asymptomatic)



should not be obliged to wear a mask to prevent infection with COVID-19 because (i) it does not significantly reduce the risk of infection and (ii) it can affect supply and demand to the point where health care workers will have inadequate protection.

Return to play protocols must also clearly define the standards for accommodation in line with public health requirements. This includes specifications to the type of accommodations, the minimization of risk exposure for players and team staff as well as quarantine like interactions with non-tested staff or other persons.

Guiding Questions for Player Unions: The following should be considered in this context.

- How can travel and travel times be reduced to an absolute minimum?
- Can the same travel and accommodation standards be guaranteed across teams and competitions?
- Are the special requirements and protocols put in place for player and team accommodation?
- How are teams and club representatives trained on the new procedures?

EXTREME HEAT

Background: COVID-19 has caused a massive interruption of the competition and match calendar. In some countries, even in the best case scenario, competitions will have to be played in the peak of the summer period. While this is not necessarily a problem for some countries others will have to mitigate the impact of extreme heat and weather conditions. This creates an additional risk to players which needs to be mitigated in line with current heat protocols. Because of its normal regulation mechanisms, the human body maintains a constant core temperature that usually ranges from 36.1 to 37.8°C, allowing only relatively small variations. Players exposed to extreme heat have particular physiological responses aiming at the regulation of their core temperature, which affects their health and performance. The situation will be further complicated by an extremely dense match schedule and little rest periods for players.

Considerations for Player Unions & the Football Industry: Extreme heat conditions are especially determined by air temperature, sun exposure and wind speed. When playing (training or match) in extreme heat conditions, players have to deal with the excessive loss of water (and related substances such as minerals) through sweating and the increase of their internal body temperature (>40°C). When normal regulation mechanisms cannot control the increased heat production (that means that water loss through sweating is not compensated and core temperature is too high), players are at risk to suffer from heat-stress disorders (either heat cramps, heat exhaustion or heat strokes). To prevent or mitigate this risk, guidelines relying on the Wet Bulb Globe Temperature (WBGT) should be applied. The WBGT (expressed in °C or °F) is a composite temperature calculated from several relevant parameters such as air temperature, humidity, sun exposure or wind speed. FIFPRO's position related to extreme heat conditions is as follows:



- WBGT between 28 and 32°C: because of the high risk for heat-stress disorders, cooling breaks lasting 3 to 4 minutes at approximately 30 minutes into the run-of-play in both halves of the match (i.e., around the 30th minute and 75th minute respectively) must be introduced;
- WBGT > 32°C: because of the extreme risk for heat-stress disorders, training and matches must be cancelled and rescheduled.

Guiding Questions for Player Unions: The following should be considered in this context.

- Is there a specific risk for extreme weather and extreme heat in your country?
- Have the existing heat protocols been revised for the special circumstances of the COVID-19 crisis?
- Can kick-off times be scheduled in the morning or evening in order to avoid peak periods?
- Has the league and the broadcaster contractually agreed on certain kick-off times?
- Have training schedules and plans been adjusted to the new situation?

PLAYER WORKLOAD & MATCH CALENDAR

Background: The impact of COVID-19 has led to a shutdown of most continental and domestic football activities (collective training and competitions). The commitments of football stakeholders has placed an absolute priority on the finalization of domestic club competitions – leading consequently to a range of knock-on effects on the International Match Calendar. At the same time the commitment to finalise the current competition formats leads automatically to an even more condensed match calendar for professional players. In many cases this will result in a compressed period for matches to take place with little recovery times between matches and even with a shortened season break between the finalization of the season 2019/2020 and the start of the season 2020/21.

Considerations for Player Unions & the Football Industry: FIFPRO and Member Unions have published in 2019 an evidence based position on player workload and the international match calendar. The [“At the Limit Report”](#) makes a series of key recommendations to protect the health of players, and make sure they can perform at their peak. As mentioned above, overloading may amongst other health concerns lead to stress on the immune system, making players possibly more vulnerable to COVID-19. Therefore even under the economic and sporting urge to finish sportive seasons a responsible stakeholder agreement for the scheduling of matches with appropriate rest periods needs to be found. FIFPRO’s position related to player workload is as follows:

- **Rest Periods:** Medical evidence provides a range of scientific findings that together build a clear framework on how to best address and mitigate player overloading.
- **Between Matches:** Football matches involve frequent, fractionated explosive sprints with a strenuous use of muscles that can induce damage and produce post-match fatigue



that lasts up to 72 hours. Therefore, having a congested period with a large number of matches has been correlated with poorer performances and a higher risk of injuries.

- Off-season break: Even in the current crisis situation an off-season break for players to recover physically and mentally is required. Also in the current period such a break should last at least 3-4 weeks, while the regular best practice is 5-6 weeks.

This is especially true in the following circumstances:

- A period of recovery of five days or more leads to better performances, more matches won and a lesser chance of injury for players.
- A very short period of recovery between matches – less than 72 hours – for players is associated with more matches lost for their teams;
- A short period of recovery between matches – 96 hours or less – is associated with a higher risk of injury in comparison to a longer period of up to five days;
- Playing two matches per week, with a 72 to 96 hour recovery time in between, leads to a higher risk of injury in comparison to playing a single match per week.

The newly developed match schedules may therefore need to consider specific measures to mitigate the risks of overload. Next to match scheduling and travel concerns, in other sports such measures/discussions have extended to limitations on playing time, decreased duration of matches, or special substitute regimes for the period of intense player workload.

Guiding Questions for Player Unions: The following should be considered in this context.

- Are clubs, leagues and federations appropriately including the players and their unions in match calendar adjustment discussions, in as far as they concern the health and safety of players?
- How are clubs and leagues mitigating the risks of a compressed match calendar?
- Have specific measures put in place to protect players health and safety, including specific COVID-19 related threats?
- How can the football industry ensure peak/ideal performance conditions for the players in this period?