

**Singapore Disability Sports Council (SDSC)
Safe Return to Para Sport Plan for
Post-Circuit Breaker Phase 2**

Acknowledgement

The Singapore Disability Sports Council (SDSC) thanks its member organisations - Bowling Association for the Disabled (Singapore), Deaf Sports Association (Singapore), Lawn Bowls Association for the Disabled (Singapore), Para Athletics (Singapore), and Table Tennis Association for the Disabled (Singapore) - for their contributions to this plan and its implementation.

Disclaimer

Please note that this plan is subject to changes. Adjustments may be made based on advisories from the Multi-Ministry Task Force (MTF), SportSG and other government authorities.

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1 INTRODUCTION TO POST-CIRCUIT BREAKER PHASE 2 “NEW NORMAL”

As Singapore enters the COVID-19 Post-Circuit Breaker Phase 2 on 19 June 2020, sports facilities shall reopen and face-to-face training shall be approved to resume. However, we seek the cooperation and understanding of all our stakeholders, including athletes, coaches, and officials to resume face-to-face training activities in a gradual and safe manner, so that both safety and aspirations can be balanced without compromising either. It is in our shared interest to support Singapore’s “Safe Transition” (Phase 2), to prevent a return to heightened restrictions.

To facilitate this approach, four interactive factors are identified for this Safe Management Plan.

Factor 1: Training / activity essentiality

- 1.1 Face-to-face training and activities should resume in batches for a gradual and safe return to sport. Programme goals and athlete year plans are reviewed and a tentative resumption schedule is developed for activation and review.

Factor 2: Assessment of vulnerability

- 1.2 There is currently no evidence that COVID-19 affect Persons with Disabilities (PWD) more, but COVID-19 does affect persons with underlying conditions more adversely. Therefore, as long as PWD maintain adequate safety measures, the risk of them contracting COVID-19 is the same as everyone else.
- 1.3 However, there are specific scenarios which may put athletes or attendees more at risk than others:
- Those with underlying or pre-existing medical conditions;
 - Those who are immunocompromised / have weaker immune systems, i.e. more prone to respiratory illnesses or unable to recover easily from respiratory illnesses;
 - Those who experience more tactile contact in daily routines, e.g. athletes with visual impairment, wheelchair users;
 - Those who may require additional time or simplified instruction to support their adherence to safety measures, e.g. athletes with intellectual impairment, athletes with autism;
 - Those who require others’ assistance in daily routines or sport, e.g. athletes with caregivers, athletes with competition partners, athletes who require wheelchair transfers

- 1.4 For such cases, additional controls should be implemented to mitigate risks to the individual, which includes extending measures on caregivers and athlete competition partners, engaging parents or guardians to revise safety measures with athletes, providing transport options to reduce commuting on public transport, as well as delaying the return to face-to-face trainings.
- 1.5 That being said, this assessment of vulnerability should be balanced by considering the impact of the lack of sports for such individuals. In cases where vulnerable persons could be rendered further vulnerable from the lack of sports, discussions should be held with the athlete to resume face-to-face training if reasonable controls can be identified and mutually agreed upon.
- 1.6 An individual should never, in any circumstance, be forced or threatened to return to face-to-face training if there is a valid threat to his or her health from such activities.

Factor 3: Preparation for Face-to-Face Training Resumption

Face-to-face trainings can only resume if the following are implemented:

1.7 General Measures

- 1.7.1 Appoint Safety Management Officers (SMO)
- 1.7.2 Use SafeEntry at training or event environments
- 1.7.3 Stagger training hours (if venue is small and capacity is limited)
- 1.7.4 Ensure physical spacing of:
 - 1m between individuals who are doing sedentary activities
 - 2m between individuals who are engaged in general exercise
 - 3m between individuals who are engaged in indoors high-intensity or high movement exercise
- 1.7.5 Contact sports are permitted, notwithstanding point iv above, with modification to avoid extensive body contact
- 1.7.6 Limit group / “bubble” size to 5 pax (athletes + caregivers + sport assistants), with an additional coach (i.e. maximum = 6 pax including coach)
- 1.7.7 Ensure physical spacing of at least 3m between groups if there are multiple groups sharing the space. Groups must not interact with each other.
- 1.7.8 Do not cross-deploy or mix groups (e.g. same groups to attend repeat sessions. No changing of groups which will lead to mixing.)
- 1.7.9 Wear mask at all times unless engaging in strenuous exercise
- 1.7.10 Minimise physical touchpoints
- 1.7.11 Step up cleaning
- 1.7.12 Avoid sharing equipment. If equipment is shared, wipe-down routines must be implemented before and after sessions. This includes gym equipment such as weights, and sport equipment such as basketballs.
- 1.7.13 Ensure availability of cleaning and disinfecting agents and facilities
- 1.7.14 Ensure there is evacuation and cleaning protocol for suspected / confirmed cases

1.7.15 Educate participants, e.g. reminders on safety management to athletes and officials, e.g. declaration of respiratory illnesses, travel, contact with COVID-19 cases, downloading of TraceTogether app (mandatory)

1.8 **Sport-Specific Measures**

1.8.1 Risks specific to the sport would be evaluated to determine additional measures that may be required to ensure the safety of trainings and events.

1.9 **Individual-Specific Measures**

1.9.1 Based on the vulnerability assessment carried out under Factor 2, measures specific to individual may be required to ensure the safety of trainings and events.

1.10 **Co-ownership of Safe Management with Facilities**

1.10.1 As venue providers are required to provide onsite measures, SMO must check that these onsite measures are evident before training sessions begin. For example, cleaning and disinfecting agents and facilities are provided, education materials on safety measures are displayed, and an isolation area for suspect or confirmed cases has been designated.

1.10.2 If such measures are not provided by the venue provider, SMO must report to their national disability sport association (NDSA) or SDSC to discuss how such requirements can be met.

1.11 **Additional Support Aids**

1.11.1 SDSC will prepare additional aids to NDSAs, coaches and event facilitators to ensure the smooth implementation of this Safe Management Plan. However, every individual should also take responsibility for their own safety. While thermometers, masks and sanitisers are available for contingencies, they should not be taken as the default provision.

1.11.2 Vehicles are on standby to support athletes for training, e.g. for athletes who are deemed to have increased risk of exposure due to their condition. Coaches can use a Daily Training Checklist to help them ensure that measures are not overlooked.

Factor 4: Management of Face-to-Face Sport Resumption

1.12 SMO are appointed on four levels – management level to ensure that safe management practices are applied across the board, and operational and affiliate levels to ensure that safe management is applied in respective sports. Coaches form the final and most important line of SMO who help to ensure that safe management is applied on ground.



Figure 1: Appointments of SMO

- 1.13 SMO are responsible for formulating the implementation plans, conducting inspections and checks, as well as maintaining records for subsequent audits by the authorities.
- 1.14 In practice, SMO are to be briefed on their responsibilities and required to ensure that athletes, officials and participants understand and follow safety measures when they return to training. Prior to the return to training or events, athletes, officials and attendees are to be briefed on the Safe Management Plan, and then submit a declaration to confirm their understanding to undertake the mentioned measures.
- 1.15 SMO must also keep inspection records and documentation to evidence the enforcement of safety measures. SMO are to ensure that a copy of the Safe Management Plan for the sport is available onsite and adequate education material is distributed to the attendees prior to resumption.

TABLE 1: OVERVIEW OF INTERACTIVE FACTORS THAT IMPACT THE RESUMPTION OF FACE-TO-FACE PARA SPORT IN PHASE 2

Factor	Areas of Focus	Type of Decisions	Planning and Preparation Aids
a) Training Activity Essentiality /	Programme Goals, Athlete Year Plans	When to resume, who to resume	<ul style="list-style-type: none"> • Resumption Schedule
b) Assessment of Vulnerability	Medical Conditions, Risk Exposure	How to resume, when to resume (if risks cannot be mitigated)	<ul style="list-style-type: none"> • Individual-specific measures
c) Preparation for Resumption	Environment, Education, Controls	How to resume	<ul style="list-style-type: none"> • General measures • Sport-specific measures • Pre-training declarations • Daily Training Checklist
d) Management of Resumption	Monitoring, Review, Support	How to sustain	<ul style="list-style-type: none"> • Monitoring Records

2 RESUMPTION OF FACE-TO-FACE PARA SPORT TRAININGS IN POST-CIRCUIT BREAKER PHASE 2

Based on the four interactive factors outlined in Section 1, SDSC would be approaching the resumption of face-to-face para sport trainings in post-circuit breaker Phase 2 as follows.

Training Essentiality

- 2.1 Table 2 outlines a sample resumption schedule for trainings. However, actual batching would still be subject to safety measures, e.g. limit on group sizes for sport / facility, and availability of facilities.

TABLE 2: SAMPLE RESUMPTION SCHEDULE

Batch	Programme Goal / Athlete Year Plan	Tentative Phase / Period
1	Paralympic 2021 podium / qualification	1
2	Asian 2022 podium / qualification	2 (From 19 June onwards)
3	Asean 2022 podium / qualification	2 (From 19 June onwards)
4	Pre-Development / Development	2 (From 3 July onwards)
5	Recreation or Community Bonding	2 (From 17 July onwards)

- 2.2 It is necessary to prepare batched returns, even if all sport facilities are re-opened, as training sessions would likely be limited by shrunken venue capacities, which is further affected by co-sharing of facilities with members of the public and other groups. In addition, batching allows us to monitor and review the success of safe management practices and transit more or vulnerable persons in a safe manner.
- 2.3 This schedule would be adjusted according to situations allowed by the government, and resumption reviews.

Vulnerability Assessment and Controls

- 2.4 Specific measures should be implemented to manage risks that may relate to individuals with impairments / conditions. Table 3 (on page 9) provides a general guide for reference.
- 2.5 Enhanced controls may be applied to help participants who experience increased vulnerability, e.g. loss of muscle mass or muscle tone, from lack of physical sport to resume sports activities.
- 2.6 Risk and controls should be examined individually and not assumed to be the same from individual to individual.
- 2.7 This assessment should apply to all attendees, including coaches, caregivers, and athlete competition partners.

TABLE 3: EXAMPLES OF ENHANCED RISKS AND CONTROLS

Impairment / Condition	Potential enhanced risks from	Possible enhanced controls
Physical Impairment (Severe e.g. severe cerebral palsy, severe muscular dystrophy)	<ul style="list-style-type: none"> - Caregivers, athlete competition partners (ACP) - Respiratory problems - Third-party-assisted wheelchair transfers (e.g. coach / volunteer) 	<ul style="list-style-type: none"> - Extend measures to caregivers and ACP - Face shield on top of masks - SDSC fleet support provided if no personal transport - Poncho and gloves to be worn during transfers.
Physical Impairment (Non-severe)	<ul style="list-style-type: none"> - Contact between wheelchair tyres and hands 	<ul style="list-style-type: none"> - Nil needed (Addressed by handwashing / sanitisation)
Visual Impairment	<ul style="list-style-type: none"> - Difficulty in assessing crowds or public safety markers - Difficulty scanning QR codes at venues 	<ul style="list-style-type: none"> - SDSC fleet support provided if no personal transport - Assist registration (first-time) and save login page thereafter
Intellectual Impairment	<ul style="list-style-type: none"> - Difficulty in comprehending or remembering safety measures 	<ul style="list-style-type: none"> - Simplify instruction - Repeat reminders - Engage parents / caregivers to participate in joint education process
Deaf or Hard of Hearing	Nil	Nil
Autism	<ul style="list-style-type: none"> - Difficulty in comprehending or remembering safety measures 	<ul style="list-style-type: none"> - Simplify instruction - Repeat reminders - Engage parents / caregivers to participate in joint education process
Other underlying or pre-existing conditions / Immunocompromised or weak immune system	<ul style="list-style-type: none"> - Serious health complications if infected 	Face shield on top of masks; limit to individual activities; no sharing of equipment. Consult doctor for advice, or delay resumption
60 years old and above	<ul style="list-style-type: none"> - Serious health complications if infected 	Encouraged to stay fit at home. Otherwise, face shield on top of masks; limit to individual activities; no sharing of equipment. May consult doctor for advice / delay resumption.

Preparation and Management of Sport Resumption

2.8 When sports facilities reopen, face-to-face para sport trainings or activities may be permitted with the measures below. These measures are applied to all attendees, including caregivers and athlete competition partners, unless otherwise specified.

2.9 *General Measures (AT ALL TIMES)*

2.9.1 If you are suspected or confirmed to have COVID-19 at any time, inform SDSC or your NDSA at the earliest possible time so that safety measures can be implemented to protect others. You may be a suspect case if you display symptoms such as coughing, running nose, shortness of breath or difficulty breathing, sore throat, loss of taste or smell, diarrhoea or body ache. Use the [Singapore COVID-19 Symptom Checker](#) to decide what your next steps should be. Inform SDSC or your NDSA of your diagnosis at the earliest possible time.

2.9.2 If you have someone within your household that has been issued with a Stay Home Notice or Quarantine Notice, you must refrain from training for 14 days starting from the commencement date of the Notice. Report the matter to SDSC or your NDSA at the earliest possible time.

2.9.3 If you have come into close contact with someone who has tested positive for COVID-19, you must self-quarantine at home for 14 days starting from the date of last contact with the person.

2.9.4 If you have been issued medical leave by a medical practitioner, you must stay home until the completion of your medical leave even if you start feeling better before the end of it.

2.10 *General Measures (BEFORE TRAINING SESSION / ACTIVITY)*

2.10.1 Ensure that you have completed the Declaration Form for Resumption of Para Sport, provided by SDSC or your National Disability Sport Association (NDSA). This is a one-time declaration unless you wish to make changes to any part of your declaration.

2.10.2 Take temperature before leaving for training / activity. If you have a fever (temperature > 37.5 °C) or display COVID-19 symptoms (i.e. coughing / running nose / shortness of breath or difficulty breathing / sore throat / loss of taste or smell / diarrhoea / body ache), you must not come for training / activity.

2.10.3 Bring your thermometer along for temperature recording at venue, if such provisions are not available at the venue, or from your coach / facilitator.

2.10.4 Wear a face mask, upon leaving your home. A re-usable cloth mask or disposable surgical mask may be used. The mask should be worn properly to ensure it covers the nose and mouth with an effective seal. A spare mask should be brought along to standby in case the first mask gets dirtied

- or damaged. Bring along your personal water bottle and hand sanitizer.
- 2.10.5 No carpooling will be allowed. If taking public transport, refrain from talking on the phone or with another person.
- 2.10.6 Proceed to training alone or with essential personnel only, such as your caregiver if you require assistance for your activities of daily living. Do not bring along siblings, friends, parents or others who are not essential to assist you. All attendees must be registered for the slot, and not turn up without notice, to ensure that the group size is kept.
- 2.10.7 Confirm your assigned training slot before you turn up for training. Do not visit others at their training slots or attempt to use another slot if you miss yours.
- 2.10.8 Come dressed for training. Do not use toilets, changing rooms or common shared areas for changing of clothes. Toilets should only be used for sanitation purposes.
- 2.10.9 Download and activate the TraceTogether App and/or carry the TraceTogether Token as it enables tracing by proximity to each person.
- 2.10.10 Coaches are to ensure that trainings times are staggered, with at least 30 minutes between sessions, to prevent the cross contact between different groups of attendees.
- 2.10.11 Group sizes must be limited to 5, including caregivers, athlete competition partners, and volunteers, unless otherwise advised under sport-specific measures. Training drills and activities should enable the required safe distancing where possible, at 2m between individuals who are exercising and 3m between individuals who are exercising indoors at high intensity. Groups should be distanced at least 3m apart, if using the same venue.
- 2.11 **General Measures (ARRIVAL AT VENUE)**
- 2.11.1 Scan SafeEntry QR Code and 'check in' at venue entrance to aid contact tracing.
- 2.11.2 Wash hands with soap and water right after entering facility. Use hand sanitizer only if hand-washing is not available, as hand-washing is more effective. Enough sanitizer should be used to cover surface of hands and the gel should be rubbed until the sanitizing solution/gel dries.
- 2.11.3 Coaches / Facilitators should arrive at least 30 minutes earlier, before training commences, to facilitate SafeEntry procedures which include temperature check. Coaches / Facilitators will check the temperature of athletes / attendees if this is not done by the venue provider. Those having a temperature of 37.5 degrees Celsius and above will be barred from entry and asked to return home immediately. Temperatures are to be recorded.

- 2.11.4 Coaches / Facilitators are to conduct visual scans that athletes / attendees are well (i.e. not displaying symptoms such as coughing, running nose, shortness of breath or difficulty breathing, sore throat, fatigue) and check that athletes / attendees are wearing their mask properly (nose and mouth covered with an effective seal). Anyone displaying said symptoms will be barred from entry and asked to return home immediately.
- 2.11.5 Coaches / Facilitators are to use the checklist provided by SDSC and/or your NDSA as a guide on measures to be taken before and after trainings / activities. Temperature recordings are to be submitted together in the checklist.
- 2.11.6 Athletes / attendees are to arrive at least 15 minutes earlier before training commences to allow adequate time for SafeEntry procedures to be observed.
- 2.11.7 Athletes / attendees are required to retrieve and sanitise their equipment before training commences, if they use equipment stored at or provided by the venue. Coaches / facilitators may assist if the athlete / attendee requires help due to their condition, e.g. total visual impairment.
- 2.11.8 Adhere to any other safety instructions or protocols that may be implemented by the venue owner. Where there are differing measures between those of the venue owner and those of SDSC or the NDSA, adhere to the stricter / strictest set.
- 2.12 **General Measures (ACTIVITY AT TRAINING / ACTIVITY VENUE)**
- 2.12.1 Keep 1m distance from the nearest individual when not exercising, 2m distance when exercising, and 3m distance when exercising indoors at high intensity. (Note further instructions that may fall under sport-specific measures.)
- 2.12.2 Avoid physical contact unless permitted under sport-specific measures. Social exchanges, including fist bumps, high fives, should also be avoided.
- 2.12.3 Any activities that can be done at home, should be done at home (e.g. pre-training briefings, recovery sessions, training debriefs). No eating at venue.
- 2.12.4 Practise good hygiene, e.g. regular and thorough handwashing/hand sanitization, especially each time you leave and return to the venue. Cover your mouth or nose with a tissue or sleeve when coughing/sneezing.
- 2.12.5 Do not share personal equipment, including drink bottles, cups, towels etc.
- 2.12.6 Coaches should have their mask on at all times. Athletes / Attendees can remove their mask if they are engaged in strenuous exercise. Masks must be put on again right after exercise is completed.

- 2.12.7 Face shields may be worn if the coach or attendee have health conditions that may result in breathing or other medical difficulties when a mask is worn for a prolonged period of time. Face shields may be requested on top of masks for additional protection if the risks of transmission of droplets to eyes is high during practice of the sport, or if persons with higher vulnerability are involved in the session. A face shield, if used, must be worn properly so that it covers the entire face, from the forehead to below the chin, wrapping around the sides of the face.
- 2.12.8 Adhere to any other safety instructions or protocols that may be implemented by the venue owner. Where there are differing measures between those of the venue owner and those of SDSC or the NDSA, adhere to the stricter / strictest set.
- 2.12.9 Rest areas should be set for individuals at least 2m apart, if the individuals are involved in high intensity exercise or contact sports. Otherwise, rest areas should be at least 1m apart. Refrain from socialising during rest times.
- 2.12.10 If you feel unwell halfway through training or the activity, alert the coach or facilitator immediately.
- 2.12.11 If anyone in the training or activity group displays COVID-19 symptoms (coughing / running nose / shortness of breath or difficulty breathing / sore throat / loss of taste or smell / diarrhoea / body ache), coaches / facilitators are to isolate the person and alert the venue staff immediately. In the event that the venue does not have an evacuation facilitator, the coach / facilitator is to bring the individual to the isolation area, and activate an ambulance to bring the individual to a hospital / COVID-19 test facility. All contact surfaces that the individual has interacted with are to be disinfected immediately, and all attendees of that session are to be dismissed and informed to monitor their health after returning home. The coach / facilitator must also report the case to SDSC or their NDSA immediately so that the SMO can follow up on the individual's diagnosis.
- 2.13 **General Measures (AFTER TRAINING)**
- 2.13.1 Attendees are to sanitise used equipment and return them to storage areas.
- 2.13.2 Attendees are to wipe down high contact surfaces, e.g. stability poles.
- 2.13.3 Coaches / facilitators may assist if the athlete / attendee requires help due to their condition, e.g. total visual impairment.
- 2.13.4 Wash hands with soap and water before exiting venue. Use hand sanitizer only if hand-washing is not available, as hand-washing is more effective. Enough sanitizer should be used to cover surface of hands and the gel should be rubbed until the sanitizing solution/gel dries.

- 2.13.5 “Get in, Train and Get out”. Do not congregate after training or activity. Take your temperature and sign out with the coach or facilitator. Leave the venue promptly, and ‘check out’ of SafeEntry when you leave.
- 2.13.6 Coaches / Facilitators will check the temperature of athletes / attendees if this is not done by the venue provider. Those having a temperature of 37.5 degrees Celsius and above should be requested to visit a doctor. Temperatures are to be recorded.
- 2.14 **General Measures (JOURNEY HOME FROM TRAINING)**
- 2.14.1 Trainees and coaches should not have any social meet ups before or after training and are required to go home directly.
- 2.14.2 No carpooling allowed. If taking public transport, refrain from talking on the phone or with another person.
- 2.15 **Sport-Specific Measures**
- 2.15.1 Table 4 outlines specific measures that are to be taken according to the sport being practised. Additional measures may be taken where necessary. SMO should also check if there are new or overlooked needs upon training resumption.

TABLE 4: SPORT-SPECIFIC MEASURES

Sport	Specific Control/s
Athletics	One lane per athlete, with min. 2m distancing OR staggering of athlete to increase physical distance of min. 3m in between athletes if sharing lanes. Avoid running in slipstream of others. No sharing of equipment e.g. javelin, discus, jump mats, pole vault, shot put, club, starting blocks, racing chair, throwing chair. High contact points to note: all above-mentioned equipment, store handles.
Archery	Gloves for agent to retrieve arrows. No sharing of arrows between archers. High contact points to note: bow, arrows, stool.
Badminton	Marking of shuttlecocks to minimize cross contact. Max of 4 pax per court with 1 additional coach. High contact points to note: shuttlecocks, racquets.
Boccia	Marking of balls to minimize cross contact. One Jack ball per athlete. Face shields for coaches, sport assistants, on top of masks. Face shields for athletes (where possible). High contact points to note: boccia balls, ramps, wheelchairs, paddles, calipers, cage handles.
Chess	Use of personal gloves during play. Face shield on top of mask due to indoor close proximity to fellow chess player. High contact points to note: chess set.

Cycling	Avoid cycling in slipstream of others – maintain 3m from cyclist in front. Max. of 5 in a group with 1 additional coach. High contact points to note: bicycles, pumps, store handle, guards, helmets.
Equestrian	Refer to Safe Management Plan of Equestrian Federation of Singapore (EFS). No sharing of personal equipment (helmets, saddles, etc.)
Goalball	Use of gloves by coaches, sport assistants. High contact points to note: balls, floor, goalpost, goggles, guards.
Football	Contact is allowed, but no extensive body contact. No deliberate body contact drills and activities. High contact points to note: balls, locker handle.
Lawn Bowls	Max. of 5 in a group with 1 additional coach. No sharing of bowls (bowls should be marked for identification), cloths, measures etc. Use separate jacks and mats (or ensure that the same player on each rink places mats or places / rolls jacks). Limit to individual drills for individuals aged 60 and above. High contact points to note: balls, assistive poles, measures, store handle.
Powerlifting	No sharing of benches or bars (1 athlete 1 bench 1 bar per session). Benches should be at least 2m apart. Group limit of 5 persons, with 1 additional coach. Use of gloves by coach to adjust weights, and face shield on top of mask. High contact points to note: benches, weights.
Sailing	Max. of 5 on the water, unless it is a water safety issue. Dedicated Personal Flotation Device (PFD) per participant. High contact points to note: boats, including sails, office handles, personal flotation devices.
Shooting	One firing point per shooter, with physical separator. If physical separator is not available, to distance with empty lanes. No sharing of equipment. High contact points to note: guns, tables, stools.
Swimming	Up to 5 athletes per lane for lane swimming. Max. of 5 in a group with 1 additional coach. Wear swimsuit to training. Shower at home. Coaches should preferably be wearing a mask or face shield if they are in close proximity to participants. High contact points to note: gym equipment if any at venue.
Table Tennis	Max. of 5 in a group with 1 additional coach. High contact points to note: balls, paddles, tables, ball pickers.
Tenpin Bowling	Max. of 5 in a group with 1 additional coach. Alternative seating per lane. No sharing of bowling balls or guide rails. House balls and shoes are to be individually issued. High contact points to note: balls, seats, score console, ball return area, guide rails, goggles, store handle.
Triathlon	Refer to measures for different discipline.

Wheelchair Basketball	Max. of 5 in a group with 1 additional coach. Contact is allowed, but no extensive body contact. No deliberate body contact drills and activities. High contact points to note: wheelchairs, balls, store handle.
Wheelchair Rugby	Max. of 5 in a group with 1 additional coach. Contact is allowed, but no extensive body contact. No deliberate body contact drills and activities. High contact points to note: wheelchairs, balls, guards, gloves, store handle.
Wheelchair Tennis	Max of 4 athletes and 1 coach per court. High contact points to note: wheelchairs, racquets, store handle.

Gradual Loading

- 2.16 Training loads should generally start off low and gradually increase, as a sudden increase of load (after a prolonged period of rest) can lead to injury.

Contingency Protocols

- 2.17 If an attendee is reported to SDSC as a confirmed COVID-19 case, SDSC will inform the venue which the attendee has used to activate deep cleaning procedures and contact tracing. (If the attendee is reported to the NDSA, the NDSA must inform SDSC in addition to informing the venue provider.)

- 2.18 SDSC / the NDSA will identify other attendees at the session and submit this list to MOH for contact tracing.

Disciplinary Action

- 2.19 Any attendee may be subjected to disciplinary action for failure to comply with the safety measures listed in this document due to wilful negligence or disregard for safety to self or others.

3 RESUMPTION OF FACE-TO-FACE PARA SPORT EVENTS AND OTHER PROGRAMMES IN POST-CIRCUIT BREAKER PHASE 2

Safety measures for events and programmes in Phase 2 shall be the same as those outlined for trainings to resume.

Events

- 3.1 Only selection or performance trials may be conducted in Phase 2, if such trials are deemed essential for high performance goals, such as performance monitoring for Paralympic-bound athletes, or qualification for major games and sanctioned international championships.

Other Programmes

- 3.2 The organisation of other programmes is subject to government guidelines and programme partner's in-house guidelines. For example, organisation of a programme in a primary school may require the execution in a class-based setting, without inter-class mingling. More time should be allocated in between sessions to allow for cleaning.

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