



**ARENA RESTART PROTOCOLS 2020/21**





**COVID-19  
PROTOCOL**

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## 2020/21 NHL SEASON COVID-19 PROTOCOL

This Protocol sets out the preventative measures applicable to the 2020/21 NHL Season (including Training Camp) which are intended to help protect against the contraction and spread of COVID-19, as well as procedures relating to the detection of infection and transmission of COVID-19. The measures set forth to detect COVID-19 are an important part of this Protocol. Strict adherence to preventative measures by all participants, including diligent hygiene and distancing practices, however, will be crucial to reduce the likelihood of the contraction and spread of infection in the first instance. The health of all individuals involved in the NHL's 2020/21 Season remains the League's top priority. The NHL and the NHLPA, working closely with their respective medical, epidemiological and infectious diseases experts, have agreed to the measures set forth in this Protocol, and the provisions of the Protocol have the force and effect of the parties' Collective Bargaining Agreement.

While comprehensive, the measures outlined in this Protocol cannot mitigate all risk. A range of clinical scenarios exists for those who contract COVID-19, from very mild to fatal outcome. COVID-19 generally adversely affects older age groups and those with previously existing medical conditions, more so than younger, and otherwise healthy, individuals, and we recognize that Players and Club personnel have family and household members who may fall into these vulnerable categories.

All individuals and Clubs involved in the NHL's 2020/21 Season are required to comply with this Protocol (and appended documents), as well as all applicable regulations, including additional restrictions (if any) that may be imposed by local, provincial/state, and federal health authorities. If the applicable local, provincial/state or federal regulations impose less stringent standards than are set forth in this Protocol, this Protocol will govern, unless expressly stated herein. As set out herein, established violations of, and/or lack of compliance with, this Protocol, will result in significant Club and individual sanctions, including potential forfeiture of games, fines and reimbursements of expenses, loss of draft choices, and/or ineligibility for participation in Training Activities (as defined herein).

**NOTE:** Anyone who has had a confirmed case of COVID-19 shall still adhere to all preventive measures in this protocol, including quarantine, distancing, masking, handwashing, etc. Since there are different strains of COVID-19, the specificity and duration of immunity is unknown. It is also unknown if those with immunity can transiently shed (and potentially infect others) if exposed, even if they do not develop infection/symptoms. As such, there is no "immunity passport" that will exempt anyone who has had COVID-19 from these measures. As described in further detail in the Positive Test Protocol, individuals in Groups 1 and 2A who have had a confirmed case of COVID-19 shall not be subject to the PCR testing requested herein for 90 days after initially testing positive.

Individuals who receive COVID-19 vaccination shall continue with the testing requirements and other preventative measures required in this Protocol.

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## A. TRAINING CAMP MODIFICATIONS

During Training Camp, Players are permitted to engage in full team activities when on the ice. With respect to off-ice training activities, the Clubs shall schedule the Players to participate in workouts in the weight room in small groups of up to a **maximum of ten (10) Players**, for the purpose of preventing the spread of any infection or exposure that might occur outside that group and in order to facilitate contact tracing.

For the duration of Training Camp, Players shall remain in the same small group for off-ice training. The schedule must allow for sufficient time between sessions to allow for proper disinfection of training facilities and equipment. To the extent possible, and in connection with on-ice practices, Players should only access the locker room with their small group.

Coaches, General Managers and Hockey Operations personnel will be permitted to have direct in-person interactions with Players and conduct activities in a typical pre-season Training Camp fashion while adhering to the preventative and other measures described below. All participants in the 2020/21 NHL Season will be assigned to a specific “Group” number based on their roles and responsibilities, on the one hand, and their need for access to “Restricted Areas”, as detailed in Section C of this Protocol, on the other.

Fitness testing of Players by Clubs, whether on-ice or off-ice, during the 2020/21 NHL Season (including Training Camp) shall be conducted in accordance with the **Fitness Testing Standards** issued by the NHL/NHLPA Fitness Testing Working Group. Special attention shall be paid to physical distancing of a minimum distance of 9 feet (3 meters) during all activities entailing physical exertion.

Clubs that are unable to allow access to Players in their facility as contemplated by this Protocol due to public health regulations shall notify the League at [REDACTED] so we can work with your Club to determine whether alternative arrangements are appropriate or necessary. The League shall notify the NHLPA immediately upon receipt of such notice.

The provisions governing on-ice and off-ice activities in Training Camp similarly apply for Club/ Player training activities during the NHL Season, and are hereafter referred to collectively as “Training Activities.” The NHL and NHLPA agree to review these provisions before the conclusion of the Regular Season, and shall endeavor to reach agreement on provisions of the Protocol that are applicable to the Playoffs.

## B. CLUB TRAVELLING PARTY

Each Club will be permitted to bring a maximum of 50 persons (Players and other Club staff in Groups 1 and 2A only) on team-related travel to NHL Season Games, inclusive of Players, Coaches, and all other Club personnel permitted to travel on the Club charter (the Club’s “Travelling Party”). All Club travel shall be in accordance with the provisions of this Protocol and the 2020/21 Season **Club Travel Protocol**.

## C. PRACTICES FOR HOME AND VISITING TEAMS

Home teams must make available the game arena or their practice facility to visiting teams for practice. Visiting teams may not practice in other facilities owned or operated by third-parties.

Team practices are not permitted to be open to the public.

## D. PREVENTATIVE MEASURES TO ADOPT AT THE CLUB AND WITHIN YOUR COMMUNITY

The situations that pose the greatest risk of infection are social gatherings and in-person interactions. It is critical for all individuals participating in the NHL's 2020/21 Season to adopt key preventative measures during their time away from the Club's facilities, in addition to the measures adopted while in the more controlled environment of the Club facility. Medical evidence suggests that participants in team sports have experienced significant transmission of COVID-19 arising out of in-person interactions in the workplace in the context of prolonged and not suitably distanced Club meetings in indoor spaces involving unmasked participants. Transmission of COVID-19 has also occurred during unmasked social interactions that have occurred outside of the workplace, including interactions involving teammates, family, and friends within the person's community, and most notably, while dining. It is, therefore, strongly recommended that all participants in the NHL's 2020/21 Season conduct themselves as follows while they are outside the facility and in the community:

- Stay at home to the greatest extent possible and do not engage in unnecessary interactions with non-family members. This includes:
  - Diligently wearing face coverings and physically distancing both inside and outside of the Club Facilities.
  - Avoiding social interactions where you are in close contact with non-family members; to the extent these gatherings are necessary, limit the size of the gathering, maintain distancing, try to stay outdoors, and all individuals must wear face coverings.
  - When in your home market, avoiding going to restaurants, bars, and clubs. COVID-19 transmission is suspected to occur in community interactions at restaurants and in bars, where patrons – including your own guests – are unmasked for extended periods of time to dine and consume beverages. Sitting outside at a restaurant is less risky but does not eliminate the possible person-to-person transmission of COVID-19.
  - Not engaging in dining, even if in a home, with others that are not in your household.
  - Not participating in crowded situations, including parties or larger gatherings, and environments where significant numbers of individuals from the community may gather, including schools and shopping malls.
  - Avoiding the use of public transportation.
  - Relying on delivery services for groceries or meals, whenever feasible.
- All promotional activities involving Players and Club Personnel (including Player and Club sponsorships) shall be permitted only to the extent approved by the local health authorities, and in the case they are approved, limited to those with strict precautionary measures in place, including but not limited to, the following:





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Group 1 individuals include:

- Players
- Coaches, including Video Coaches
- Athletic Trainers (at least 2)
- Strength and Conditioning Coach(es)
- Equipment Managers (at least 2)
- Massage, chiropractic and other performance personnel
- Club Neuropsychologists (Training Camp and initial/follow-up evaluations only)
- Club’s Physicians and dentists

In addition, the On-Ice Officials assigned to work NHL games will also be deemed Group 1 individuals and will have corresponding access to Restricted Areas in Game Facilities and will be similarly required to observe Protocol responsibilities and safeguards required for Group 1 individuals.

Absent extenuating circumstances, Group 1 individuals are prohibited from accessing Non-Restricted Areas.

## **GROUP 2** //////////////////////////////////////

Group 2 consists of additional personnel whose job function requires them to have access to Restricted Areas, and further: (a) be in close proximity to Players and other Group 1 personnel, but on a less frequent and for shorter duration-basis than Group 1 personnel; and (b) who always maintain the use of face coverings and physical distancing. Group 2 personnel should also be limited to essential personnel only. Individuals in Group 2 will be tested (if applicable) in accordance with the Testing strategy outlined in Section L2.

- **Group 2A (Club) personnel may include:**
  - General Managers and Assistant General Managers
  - Other necessary Hockey Operations Personnel
  - Club Public Relations/Communications/Social Media Personnel  
*Limit of 4 individuals at any one time*
  - Club Transportation Personnel
  - Club Travel Coordinators/Club Services Coordinator
  - Club Video Replay Technicians
  - Club IT Support requiring access to Restricted Areas (e.g., during interviews, etc.)
  - X-Ray Technician(s)
  - Locker Room Attendants (if different from Club-engaged cleaning crews)  
*Limit of 2 individuals per Club<sup>1</sup>*
  - Security assigned to Restricted Areas
  - COVID-19 Collection and Testing Personnel
  - NHLPA Personnel designated as “Player Contact Representatives”

<sup>1</sup> Rules regarding locker room attendants and personnel involved in equipment transfers are in the 2020/21 NHL Season Locker Room Attendant and Visiting Equipment Protocol







Group 5 individuals shall have no interactions with any individuals in Groups 1-3 while at the Club facility.

**CREDENTIAL AND GROUP LISTS** //

Credentials shall be produced for all individuals in Groups 1-4. The League will provide a standardized credential for all individuals in Groups 1 and 2. Additional information will be provided in a separate communication regarding this process, and the requirements, and criteria for credentials for Groups 3 and 4.

The credentials must be worn around the neck, and exposed, at all times when in the Club facility (and for Club personnel, during travel for away games) other than when individuals are in their own hotel room or in game/practice play.

No one in Groups 1-4 shall be permitted into the Club facility without a credential.

**CLUB INFECTIOUS DISEASE CONSULTANT** //

Each Club is required to retain an Infectious Disease Consultant (“Club ID Consultant”), defined as a medical doctor with specialty training and certification in infectious diseases. The Club ID Consultant shall be available to the Club on short notice to fulfill the responsibilities set out in this Protocol.

**FACILITY COMPLIANCE OFFICER** //

Each Club is responsible for ensuring that a Facility Compliance Officer, who has management responsibility at the facility, who is familiar with and has authority to enforce policy, and who can oversee a team of facility personnel to ensure the responsibilities herein are accomplished, is appointed for each of: (i) the Club’s practice facility (the “Practice Facility Compliance Officer”), and (ii) the Club’s Game Arena (the “Game Arena Compliance Officer”)<sup>6</sup>. The Facility Compliance Officers are responsible for ensuring compliance with all aspects of this Protocol at their respective facility. The Practice Facility Compliance Officer shall maintain a regular, full-time presence at the Club’s facility when the Club is practicing and must be an individual who has management responsibility at the facility, who is familiar with and has authority to enforce policy. The Club’s Game Arena Compliance Officer shall maintain a regular full-time presence at the Club’s Game arena on days the Club is playing games, in addition to non-game days as necessary in order to fulfil the below responsibilities and must be an individual who has management responsibility at the arena, who is familiar with and has authority to enforce policy. The responsibilities of the Facility Compliance Officers include the following:

- **CREDENTIALS:** Ensure that credentials are issued, and assign necessary personnel to ensure that access restrictions are enforced in accordance with this Protocol. Establish processes to ensure that no one in Groups 1-4 is permitted access to the Club facility without a credential. Establish processes to ensure that Group Credentials are worn at all times (other than for Players, who will not be required to wear credentials during Games/Practice, or while in the locker room).

<sup>6</sup> One individual may serve in this role for both the Practice Facility and the Club’s Game Arena, to the extent the individual has sufficient time to serve in both roles, as well as the appropriate access and enforcement capabilities at both locations.

- **SIGNAGE REGARDING ZONES:** Ensure that there is sufficient and proper signage (including, but not limited to, floor and wall decals) showing delineation of access zones and which groups are permitted (or not permitted) access to each zone.
- **ACCESS RESTRICTIONS:** Establish processes and assign necessary personnel to ensure that access restrictions to each Restricted Area and Non-Restricted Area is enforced by Security personnel who are physically present, and who check all individuals' credentials before allowing access. No individual shall be admitted access to a Restricted Area without the approval of Security personnel, who shall remain present at all times that any individuals are in, or require access to, such Restricted Areas.
- **SIGNAGE REGARDING HYGIENE:** Ensure there is sufficient and proper signage in all Restricted and Non-Restricted areas of the Club facilities to communicate information and Protocol requirements related to physical distancing, face coverings, and hand washing/sanitizing.
- **PROPER CLEANING AND DISINFECTING:** Oversee administration of the cleaning and disinfecting requirements in this Protocol, including frequent communication with, and the provision of education to, facility cleaning personnel in respect of such requirements.
- **CLEANING SUPPLIES:** Oversee procurement and distribution of hand sanitizer stations and disinfectant wipes throughout the Club Facilities (and ensuring that all relevant parties have such supplies in their working areas), and refilling such stations on an as needed basis.
- **EDUCATION:** Provide (or designate an appropriate designee to provide) education to all practice facility and arena personnel and contractors on the applicable provisions of this Protocol.
- **CIRCULATION PATHS:** Set up processes and assign necessary personnel to establish, and enforce compliance with, separate areas and circulation paths at the Club facility for each Group, to the extent possible, for:
  - Ingress and Egress
  - Security screenings
  - Medical and Health screeningExamples include, but are not limited to: one-way directional walking paths; use of physical barriers to provide separation of (and buffers between) Restricted and Non-Restricted Areas and paths of travel that are shared between Restricted Area individuals and Non-Restricted Area individuals; provide distancing markers along pathways; limit capacity and use capacity signage in elevators; and place hand sanitizer stands (touchless if possible) throughout the circulation paths.
- **SHARED FACILITIES:** Establishing processes to ensure compliance with the obligations imposed on facilities that share their space with the public and/or other organizations (if applicable), as set forth in Section F of this Protocol.

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- **SCREENING:** Establish and execute processes to screen Groups 2B (non-Club staff) individuals via electronic means or otherwise (and secondary screening and isolation area, as well as exit pathways, if needed) for individuals providing services at the arena, or otherwise entering the Club Practice Facility or Game Arena, as set forth in Section L. The FCO shall ensure compliance with the requirement that any individuals who answer in the affirmative to the exposure questions as set forth in Section L(2) are not permitted entry to the Club Facilities.

Regularly check compliance with all of these requirements. It is recommended that each Facility Compliance Officer utilize a team of personnel to help ensure compliance with the above aspects of the Protocol.

Each Facility Compliance Officer shall, on a weekly basis, prepare a report certifying if each of the foregoing requirements has been satisfied. Additional reports shall be provided detailing the circumstances of any non-compliance with these requirements immediately. A copy of the reports shall be provided to the League [REDACTED] and to the NHLPA [REDACTED]. All reports must be signed by the Facility Compliance Officer. The forms provided herein shall be used for these purposes.

The Facility Compliance Officer(s) shall receive Group 2(c) status.

## **CLUB COMPLIANCE OFFICER** //////////////////////////////////////

Each Club shall appoint a Club Compliance Officer, who will be responsible for monitoring and enforcing the Club's compliance with the following aspects of the Protocol:

- Players and all other Club Personnel received the required PCR testing;
- Players and all other Club Personnel completed their daily symptom screening and temperature checks;
- Players and all other Club Personnel wore face coverings properly and at all times required, and were physically distanced in all required situations;
- Personnel in Groups 1 and 2A did not have in-person interactions while in the Club facilities with personnel in Groups 3, 4 or 5, while at home or on the road; and
- Overseeing and approving potential dining excursions as described in the Travel Protocol.

The Club Compliance Officer must be a senior member of the Club's Travelling Party (the individual is required to accompany the Club during Club travel) with compliance experience. This role can be filled by a full-time employee of the Club who has the authority and scope of responsibilities to enforce these requirements, including but not limited to an Athletic Trainer or Team Services personnel. This role is similar to the role the Club Compliance Officer served during Phase 4 of the NHL's Return to Play in 2019/20.

Each Club's Compliance Officer shall certify, in writing, on a weekly basis that all members of the Club have remained compliant with all necessary aspects of the Protocol. In the event that any member of the Club's Travelling Party is not compliant with one or more aspects of the Protocol, the Club's Compliance Officer shall report such noncompliance and provide details on how and by when the noncompliance will be remedied. A copy of the reports shall be provided to the League [REDACTED] and to the NHLPA [REDACTED]. The forms included herein shall be used for these purposes.



## CLUB CONTACT TRACING OFFICER //

A member of each Club shall be designated as the Club Contact Tracing Officer, responsible for managing the Club’s contact tracing process (further described in the Positive Test Protocol for Club Personnel). The Club Contact Tracing Officer will require dedicated and extensive time commitment in the case of single or multiple positive COVID-19 tests within a Club. This role requires a variety of interpersonal skills and may be best suited for an individual with prior investigative experience, attention to detail, and discretion with respect to confidential information, such as a member of the Club’s legal staff.

- This role shall include:
  - Designating and training a team of personnel to conduct contact tracing at the Club;
  - Coordinating with any third party contact tracing service providers retained to assist the Club;
  - Communicating with the League office regarding Club contact tracing and follow-up; and
  - Coordinating the Club’s relationship with and reporting to local health authorities in respect of contact tracing.
- Club Contact Tracing Officers shall complete an online contact tracing course resulting in certification of competency with contact tracing (e.g., **Association of State and Territorial Health Officials** or **Johns Hopkins University**, and **review relevant CDC resources, which also provide information on available courses as well as additional information**).
  - This course must be completed prior to the opening of the Club’s Training Camp in order for the Club Contact Tracing Officer to serve in this role.
  - All other individuals at the Club tasked with contact tracing shall complete such a course as well.

## F. SHARED FACILITIES

Facilities that Clubs share with either the public and/or other organizations must comply with certain requirements as set out in this Protocol.

Group 1 and 2 individuals shall not occupy the same areas of Club Facilities at the same time as members of the public and/or any other organizations (youth teams, college teams, etc.).

The NHL’s Cleaning & Disinfecting Requirements shall be complied with prior to a Club’s use of any such areas.

## G. TRAVEL, QUARANTINE, AND TRAINING CAMP REQUIREMENTS

### TRAVEL //

All travel in connection with the 2020/21 NHL Season, including returning to the Club’s home market ahead of Training Camp shall be pursuant to, and in accordance with, the provisions of this Protocol and the 2020/21 Season Travel Protocol. Nothing in this 2020/21 Season Travel Protocol shall supersede the requirements for international travelers to Canada outlined



in the Government of Canada’s Minimizing the Risk of Exposure to COVID-19 in Canada Order (Mandatory Isolation) in effect.

**When on the road, individuals in the Club’s Travelling Party shall adhere to the local public health regulations of the market being visited, which may be more stringent.**

## **QUARANTINE REQUIREMENTS** //////////////////////////////////////

These provisions apply to all Players (and other members of Groups 1 and 2A) reporting to the Club’s home market for Training Camp and the Regular Season, including Players on the Club’s Reserve List throughout the Season. For clarity, this includes Player recalls, trades, and/or Player signings, or other permitted categories of Players as agreed to in the Transition Rules.

A quarantine requires the following:

- Staying at home (or in place on the road);
  - The individual may not leave their home or hotel room for any purpose, including, if at a hotel, to use common amenities such as the hotel gym, bar, or restaurants; no visitors are permitted; and meals and medications must be delivered to the individual’s home or hotel room in a contactless manner.
- Monitoring yourself for symptoms (see Section M);
- Avoiding contact with other people;
- Arranging access to needed supplies such as groceries; and
- Avoiding the use of fever-reducing medications (e.g., acetaminophen, ibuprofen) as much as possible

### **LOCAL HEALTH AUTHORITY / FEDERAL QUARANTINE**

Prior to Training Camp, Players and other members of Groups 1 and 2A (see Section E) travelling back to their Club’s home city may be required to serve up to a 14-day self-quarantine if imposed by the local or federal health authorities, regardless of their mode of travel (private or charter travel) and whether or not they travelled from a high-risk environment<sup>7</sup>. Club Medical staff are responsible for determining what the applicable quarantine is under local and/or federal regulations, and what guidelines anyone subject to such a quarantine shall follow. Individuals travelling to Canada are subject to the 14-day Mandatory Isolation Order (MIO) and related guidelines, which may be modified by any National Interest Exemption (“NIE”) to the extent received. Further guidance can be found [here](#).

### **NHL QUARANTINE**

#### **A. PROVISIONS APPLICABLE TO CANADIAN CLUBS**

Under this Protocol, even if not imposed by the local or federal health authorities, if individuals report to the Club’s home city from outside of the province (regardless of method of travel), they are required to serve a 7-day self-quarantine period with a PCR testing (Health Canada or FDA authorized) regimen on days 1, 3, 5 and 7, with results available on day 8.

<sup>7</sup> This risk assessment does not apply to situations where an individual is traveling into Canada or another jurisdiction (state/provincial/local) where a mandatory quarantine is already in place (See, e.g., Local Health Authority/Federal Quarantine).



**NOTE:** If under the Federal quarantine, individuals are not permitted to leave their place of quarantine to be tested. If not under Federal quarantine, and if testing at the quarantine site is not possible, a suitable alternative should be provided, such as drive-by testing at the Club facilities that minimizes exposure of the individual.

A Player can report on day 8 for his medical evaluation if:

- All such tests are negative;
- The Player remains asymptomatic and afebrile; and
- The Club ID Consultant agrees with the determination.

Pending medical clearance, the Player can then start training in Club Facilities.

The 7-day quarantine and testing regimen is the minimum requirement if an individual is subject to this NHL-imposed quarantine (even if the local or federal jurisdiction would allow for a shorter quarantine).

If, however, Clubs can demonstrate that the Player's travel has been under five (5) hours, in an individual's own vehicle with no stops other than to refuel, Clubs may seek an exception to the above stated mandatory quarantine by seeking approval from the NHL Chief Medical Officer, Dr. Willem Meeuwisse [REDACTED], who will consult with the NHLPA. Consideration shall be given to whether the individual may separately meet the standard for a High-Risk Environment Quarantine.

In addition, Club Physicians of Canadian Clubs have discretion to impose a 7-day quarantine on individuals reporting or returning to the Club's home city from a "high-risk environment". During this assessment, Club Physicians must evaluate certain key considerations based on a discussion regarding the individual's exposure and travel history. Key factors in this consideration include rates and trends of community transmission, preventative measures taken by the individual and the individual's household members (or lack thereof), as well as whether individuals left the Club market for personal travel and are then returning to the Club market. In making this determination, Club Physicians must consider whether the individual's circumstances place them at a substantially greater risk of exposure to COVID-19 than other individuals.

## **B. PROVISIONS APPLICABLE TO US CLUBS:**

If individuals return to the Club's home city by public transportation, including commercial air or rail travel, they are required to serve a 7-day self-quarantine period with a PCR testing regimen on days 1, 3, 5 and 7, with results available on day 8.

**NOTE:** If testing at the quarantine site is not possible, a suitable alternative should be provided, such as drive-by testing at the Club facilities that minimizes exposure of the individual.

A Player can report on day 8 for his medical evaluation if:

- All such tests are negative;
- The Player remains asymptomatic and afebrile; and
- The Club ID Consultant agrees with the determination.



Pending medical clearance, the Player can then start training in Club Facilities. In addition, Club Physicians for US Clubs have discretion to impose up to a 7-day quarantine on individuals returning to the Club's home city from a "high-risk environment", even if they are not travelling via public transportation (e.g., by automobile or by private jet). During this assessment, Club Physicians must evaluate certain key considerations based on a discussion regarding the individual's exposure and travel history. Key factors in this consideration include rates and trends of community transmission, preventative measures taken by the individual and the individual's household members (or lack thereof), as well as whether individuals left the Club market for personal travel and are then returning to the Club market. In making this determination, Club Physicians must consider whether the individual's circumstances place them at a substantially greater risk of exposure to COVID-19 than other individuals. The manner in which the Player travelled to the Club city by means of private transport may also be relevant, particularly if the Player during such travel stayed in multiple hotels and frequented restaurants that were situated in areas of high incidence of COVID-19 and no special precautions were taken to protect himself from exposure. Conversely, a Player who stayed in multiple hotels and restaurants during this travel to the Club city may be considered as not having returned from a high-risk environment if the location of such hotels and restaurants were not in a area of high incidence of COVID-19.

## **OPTIONAL "WORK QUARANTINE" POTENTIALLY AFTER DAY 7 (APPLICABLE TO ALL CLUBS)**

Certain jurisdictions have allowed a "work quarantine" where the local or federal authorities have given permission for Players to serve a mandated 14-day quarantine period in a manner that permits Players to attend at the Club facility under restricted conditions during the quarantine itself. In Canada, individuals subject to a "work quarantine" are recipients of a National Interest Exemption, and release from quarantine under the Mandatory Isolation Order is conditional. For example, if a local community requires a 14-day quarantine, the Club could propose to the local health authorities the NHL's 7-day testing regimen as noted above, followed by 7 days of Players being able to utilize the Club facilities on a restricted basis, in order to complete the jurisdiction's required 14-day quarantine. To the extent they have not already done so, Clubs should consult with their local health authorities to discuss if accommodations of this nature are acceptable and exercise best efforts to obtain authorization from the authorities to implement a work quarantine. If Clubs utilize this approach, Players who are using the facility and still in the midst of their quarantine shall not interact with any other individuals (Group 1 or 2 individuals) who are not in a similar cohort and shall comply with any other conditions that may be set out by the local authorities.



## **ACCOMMODATIONS, TRAVEL AND PER DIEM DURING TRAINING CAMP** //

Players who do not maintain permanent residences in the Club city, including AHL Players, shall be provided separate hotel accommodations for the duration of their participation in Training Camp. Players without permanent residences in the Club city shall also be provided with, or reimbursed for, the cost of a rental car for the duration of Training Camp. The accommodations must be of the same high quality provided to Players during the NHL Season and shall satisfy the hygiene, distancing, cleaning and disinfecting requirements set forth in the Travel Protocol.

All Players attending Training Camp shall be paid the same per diem allowances provided in Section 15.2 of the CBA as modified by the Transition Rules, including for the period of any required quarantine.

Players' travel expenses relating to their travel to the Club City to attend training camp shall be reimbursed pursuant to the provisions of Article 15 of the CBA as modified by the Transition Rules, including Players who may travel (or, may have already travelled) to the Club City for the purpose of participating in Off Season Training at the Club Facility.

## **H. EDUCATION AND SAFETY INFORMATION**

### **EDUCATIONAL MEETING** //

Prior to the start of Training Camp, the Club's Medical Director and Head Athletic Trainer shall conduct a remote educational meeting for all members of the Club who are in Groups 1-2A (and with respect to Players, all Players who are under contract to the Club) in order to provide education on

- the 2020/21 NHL Season COVID-19 Protocol,
- the potential risks associated with involvement in Training Camp and the 2020/21 NHL Season,
- the obligations of Players and Club personnel to comply with the provisions of this Protocol, and

to provide an opportunity for everyone to ask questions regarding the current situation.

The Facility Compliance Officer(s) are responsible for providing educational training similar to the above prior to the start of the 2020/21 season to: practice facility staff, arena staff, and local rightsholders, and shall certify to the League [REDACTED] and to the NHLPA [REDACTED] that such education has been provided to all relevant groups.

The League shall provide such education to all League Staff, On-ice Officials, Off-Ice Officials and national rightsholders.

Individuals in Groups 3 and 4 shall be provided with this Protocol and other such related documents to inform and educate them on their access restrictions and allowances.

The League will provide a template PowerPoint to be used during these education sessions. The above educational content will be developed in consultation with the NHLPA.

The Clubs shall use the certification form provided herein, which shall be signed by all members of Groups 1-2A at the Club certifying that they have each participated in the educational session.

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## **SIGNAGE** //

Signs providing reminders of health and safety protocols shall be posted throughout the Club facilities (practice facility and game arena), such as signage related to face coverings, physical distancing, best practices for hand and respiratory hygiene, and identification of COVID-19 symptoms.

In addition, teams must post warnings at all entrances to Club facilities and throughout the facilities regarding the risks of COVID-19. (See sample signage, included herein).

## **I. MEDICAL STAFF AND EVALUATIONS FOR CLUBS**

### **PRE-PARTICIPATION MEDICAL EVALUATION (PPME)** //

All Players must undergo a Pre-Participation Medical Examination (PPME) prior to participating in any Training Camp activities, after which the Club doctor will issue an Exhibit 25A medical clearance if the Player is “fit to play”. Medical histories may be submitted by Players electronically via AHMS, in advance of the PPME in-person evaluation in order to reduce the in-person time needed during a PPME with Players. Further, a Club Physician may determine it unnecessary to conduct an in-person examination for the purposes of a medical clearance and for the issuance of the form Exhibit 25-A, and may instead conduct the examination virtually/electronically. The administration of an ECG, however, must be conducted in person.

Players who have tested positive for COVID-19 and have not yet had their post-COVID cardiac screen with ECG, echo and high-sensitivity troponin (see footnote 6), should endeavor to have such testing prior to coming to Training Camp. The provision of these materials, however, does not replace the requirement for Players to undergo a PPME (including ECG) at the start of Training Camp.

Only those Players who have been subject to testing and whose test results return negative shall attend their PPME examination. The PPME must be conducted at the end of the 14-day quarantine period (or the substitute 7-day quarantine period), if applicable. Members of Groups 1 and 2A present in the building during PPME examinations, including Team Physicians performing the examinations, must perform a self-temperature and symptom check two (2) hours prior to arriving at the Club facility, as described above.

Clubs may conduct early pre-season medical testing on Players who are available on a voluntary basis beginning seven (7) days prior to the first day of their Training Camp start date (after they have served any applicable quarantine period). Clubs shall arrange PPME appointment times for each Player so as to limit the number of individuals in the Club facility at any one time. PPME examinations may be conducted on the first and second day of Training Camp, to accommodate limitations on the number of individuals at the facility at any one time. However, no Player shall engage in on-ice or off-ice training activity until he has undergone a PPME.

An evaluation of Group 1 and 2A personnel shall also be conducted (and at each Club’s discretion, this may also be conducted on Group 3 personnel) for any co-morbidity that may carry increased risk with COVID-19 infection. The CDC instructs that certain individuals are at high-risk for severe illness from COVID-19, including, without limitation, people 65 years and older and people of all ages with underlying medical conditions, particularly if not well controlled. [People at Increased Risk And Other People Who Need to Take Extra Precautions.](#)

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The PPME shall include, at a minimum:

- Medical history review and focused examination
- Orthopedic history review and focused examination
- ECG<sup>8</sup>
- Post-COVID cardiac questionnaire and investigation based on checklist

During the PPME it shall also be determined whether persons sharing a home with the person being evaluated currently have symptoms or have tested positive for COVID-19 or are otherwise at high-risk for severe illness from COVID-19.

The following are not required, but may be done on a case-by-case basis, as appropriate:

- Eye examination
- Dental examination
- Lab and other investigations

Players who, after consultation with the Club doctor who conducted the PPME, and the Club ID Consultant, are determined to be at substantial risk of developing a serious illness as a result of exposure to the novel coronavirus shall be deemed to be unfit to play due to a hockey related injury and shall not be permitted to participate until the risk of contracting COVID-19 is substantially reduced (e.g., widespread vaccination availability and effectiveness). A Player may initiate a Second Opinion concerning his fitness to play status pursuant to Paragraph 5 of his Standard Player's Contract.

## NEUROPSYCHOLOGICAL BASELINE TESTING //////////////////////////////////////

Concussion baseline testing shall be performed in accordance with the NHL/NHLPA Concussion Evaluation and Management Protocol (Medical Handbook 3.1), as modified below:

- **SCAT5 App and ImPACT:** New Players, and any Players who have suffered a concussion after their most recent baseline prior to the start of the 2019/20 season, shall be administered these baseline tests. For all other Players, to reduce potential COVID-19 exposure and to support distancing and facility capacity limitations, these baseline tests shall not be administered (unless the prior baseline was deemed invalid).
- **Paper and Pencil Testing:** Consistent with the NHL/NHLPA Concussion Evaluation and Management Protocol applicable for 2020/21, Players who have been diagnosed with a concussion following the start of the 2019/20 season shall have paper and pencil testing administered by the Club's consulting neuropsychologist.

<sup>8</sup> Anyone confirmed or suspected of having had COVID-19 shall have further investigation with echocardiography and high sensitivity troponin (hsTn) and, at the discretion of the Club physician(s), consultation with a cardiologist.

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## PPE

- All Players, neuropsychologists, athletic trainers, and technicians are required to wear face coverings properly during neuropsychological test administration.

## PHYSICAL DISTANCING

- Special consideration must be given to provide proper physical distancing during neuropsychological testing. Group testing can be conducted with a maximum of 5 players at a time while keeping a minimum of 6 feet separation (or preferably more).

## CLEANING/DISINFECTING OF EQUIPMENT

- Computers, tablets, chairs, tables, pencils and other equipment must be disinfected with an approved cleaning agent after each Player has been tested.

## HAND HYGIENE

- Players, neuropsychologists, athletic trainers, and technicians must wash their hands or use an approved alcohol-based disinfectant prior to and following / neuropsychological testing.

## DESIGNATE AND COORDINATE WITH YOUR BACK-UP NEUROPSYCHOLOGIST

- Clubs must provide education to the back-up neuropsychologists about all relevant aspects of this COVID-19 Protocol, including, but not limited to, specific considerations related to neuropsychological testing procedures.

## **MENTAL HEALTH AND WELLNESS** //

Given recognition of the mental health stresses associated with the COVID-19 pandemic, Players and Club staff shall also be reminded of, and encouraged to access, the SABH and other mental health and wellness resources available to them.

## **ADDITIONAL MEDICAL CARE AND TREATMENT FOR PLAYERS** //

Players are permitted to utilize third-party wellness services providers (physiotherapists, athletic therapists, chiropractors, massage therapists, acupuncturists and ART/MAT therapists, hereinafter, collectively, the “therapists”) provided that they:

1. Are licensed/regulating professionals in good standing with their regulatory body,
2. Have infection control measure requirements set by their professional body, including, but not limited to, appropriately cleaning and disinfecting therapy space before use by any Player, and wearing, at all times, personal protective equipment by the therapist and the Player (specifically, face coverings).
3. Receive a negative COVID-19 test result within twenty-four (24) hours of treatment for the Players.
4. The Club may help to facilitate any such testing; however, all costs for testing shall be borne by the Player or the third party provider.

All other third-party provider services, whether paid for by the Club or the Player, are prohibited.





## **USE OF FACE COVERINGS** //////////////////////////////////////

In addition to maintaining physical distancing from one another, and except where expressly permitted in this Protocol, face coverings (cloth or surgical type mask) shall be properly worn at all times that individuals are in the Club facility or otherwise interacting with one another. Any Club individuals who have difficulty breathing while wearing a mask or who otherwise believe they cannot comply with this requirement should contact their Club Medical Director so that alternate arrangements can be made; similarly, arena staff who have difficulty breathing while wearing a mask or who otherwise believes they cannot comply with this requirement shall promptly contact the Human Resources personnel at the Arena. Other individuals in Groups 1-5 shall contact the Facility Compliance Officer (“FCO”), who shall coordinate with appropriate Human Resources personnel, to respond to individual scenarios. Contact information for the FCO and relevant Human Resources personnel shall be appropriately posted in key areas throughout the venue (e.g., break rooms, venue entryways, etc.).

- Face coverings shall completely cover the mouth and nose, fit snugly against the sides of the face, and shall be secured under the chin.
- Acceptable face coverings include medical grade masks or 3-layer cloth coverings (or at least two cloth layers with a filter).
- Gaiters are not permitted to function as face coverings.
- Bandanas are not permitted to function as face coverings.
- Use of a face shield does not eliminate the requirement to wear a face covering underneath.
- Face coverings with exhalation valves or vents are prohibited.

With respect to Club individuals, all participants at any Club meeting held in-person, including coaches meetings or staff-only meetings, shall wear a face covering.

Except as may be required by applicable law, the only exceptions to this requirement are as set forth below (to the extent not otherwise required by local health authorities):

- Players are not required to wear face coverings when they are exercising or while on the ice. Players and Club Personnel (e.g., Coaches and General Managers) are not required to wear face coverings during: (i) interviews with permitted Group 2 Club Public Relations/ Communications/Social Media Personnel, provided such interviews are performed with appropriate physical distancing; and (ii) interviews with Group 4 media, which shall be conducted in a virtual manner in accordance with the 2020/21 NHL Media Regulations.
- Coaches are required to wear a face covering at all times (including on the bench) except when engaging in physical exertion on the ice; and
- When eating and/or drinking (so long as appropriate physical distancing is maintained at all times). However, even if face coverings may be removed, Club personnel remain subject to the distancing provisions in the Food, Beverage and Supplement Policy, below, and the Travel Protocol.





## **SAFETY PRECAUTIONS** //

All individuals shall follow the following safety precautions:

- Wash hands frequently with soap and water for at least 20 seconds (sing “Happy Birthday” twice), or, if soap and water are not readily available, use an alcohol-based hand sanitizer, as follows:
  - Wash or disinfect hands before and after eating or drinking.
  - Wash or disinfect hands and face after touching possibly contaminated surfaces (such as high-touch areas like elevator buttons, countertops, door handles, water coolers, etc.).
- Use disinfectant wipes on items that may have been touched by others (such as pieces of luggage, chairs, office equipment, menus, etc.).
- Avoid touching your eyes, nose, and mouth, including adjusting your mask/face covering while wearing it.
- Avoid close contact with people who are sick or appear symptomatic.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands with soap or use alcohol-based sanitizer. If you do not have a tissue, cough or sneeze into your elbow, not your hands, and then wash your hands with soap or use alcohol-based sanitizer.
- Minimize handshakes, high fives and fist bumps.

Additional safety precautions can be found on the CDC and PHAC websites.

- **CDC COVID-19 Resources**
- **PHAC Awareness Resource**

Hand sanitizer and disinfectant must be procured and made readily available throughout the Club practice and arena facility, as well as in connection with Club travel.

## **USE OF GLOVES BY CLUB PERSONNEL AND OTHER GAME-RELATED STAFF** //

Glove use is not a replacement for hand hygiene practices such as hand washing, use of approved alcohol-based sanitizer and avoiding touching of one’s face.

Gloves should be discarded after each use, and after your face is touched. Hands and face should be washed when changing gloves.

Glove use is required in the following circumstances:

- All Club game staff and Club staff interacting with the Player gloves, equipment, jerseys, water bottles, and towels are required to wear latex (or similar material) gloves when tending to the benches/penalty boxes/locker-room areas.
- Off-Ice Officials while working in the penalty box during games shall wear gloves (and a face covering) when handling Player Aquafina or Gatorade bottles and towels.
- Glove use by training staff for other purposes, such as prevention of blood borne pathogens through universal precautions, shall continue.

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- Cleaning and disinfecting staffs, including staff designated for between period bench cleanings and locker room cleaning and disinfecting.
- CDT testing personnel during drug testing collections.
- Test collection personnel during COVID-19 testing.
- Dressing room attendants at all times when handling laundry, equipment or doing cleaning.

Glove use by other facility/arena personnel, including, but not limited to, retail operations and food & beverage shall follow local health authority regulations.

## **PLAYER USE OF TUBS/SAUNAS/STEAM ROOMS** //////////////////////////////////////

- Use of hot and cold tubs is **permitted**, but the following conditions apply:
  - They must be well maintained to keep bleach/bromine concentration at appropriate levels;
  - Physical distancing of 6 feet must be maintained at all times, whether by spacing of the tubs, or the Players within larger tubs.
- Saunas and steam rooms remain **prohibited**.

## **WORKOUT GEAR AND LAUNDRY** //////////////////////////////////////

- See Cleaning and Disinfecting Requirements.

## **RELIEF GELS/BALMS/CREAMS/STICKS** //////////////////////////////////////

- Use of common (i.e. shared) creams, gels, balms, and sticks are prohibited.
- Players shall be provided with individual cream/gel/balm/stick products for use at the Club Facilities.

## **SHOWERING** //////////////////////////////////////

- Given the importance of personal hygiene in infection control, Players are encouraged to shower in the Club Facilities after workouts and games, provided that distancing can be maintained. If they prefer, Players can choose to shower at home.
- Players shall not share towels, toiletries, or any personal items.
- Players must wear their own footwear at all times, including in the shower stalls.

## **PARKING** //////////////////////////////////////

- Group 1 and 2 individuals may not valet park their cars at the Clubs’ facilities. Each individual shall park their own cars in parking areas designated for Restricted Area personnel.



## **FAMILY LOUNGES AND SEATING** //////////////////////////////////////

- To the extent permitted by local regulations, Clubs shall arrange for arena seating areas for Players' families which are separate from other patron seating areas.
- Player families may sit together in a "pod" of seats. Each Player's guests shall be physically distanced from each other.
- Family lounges or other areas where Players' guests could or would otherwise congregate in groups are not permitted.
- Players' guests are subject to the same Monitoring Requirements as other individuals at the Club facilities.
- Pre- and post-game interactions between Players and their guests at the Club facilities is not permitted, given their disparate access restrictions.

## **K. FOOD, BEVERAGES, AND SUPPLEMENTS AT THE CLUB FACILITY**

The following rules are in place regarding food, beverage, and supplement consumption at Club facilities for Club personnel in Restricted Areas:

- Home Clubs may provide recovery meals or post-game nutrition to Group 1 individuals, in accordance with the following:
  - Such meals must be provided within the Restricted Areas, in rooms that shall be dedicated to such individuals only.
  - During team meals, individuals may remove face coverings only while eating or drinking (and must put them back on as soon as eating or drinking is concluded) so long as distancing is maintained (i.e., there is at least one empty seat between every two individuals). Meal rooms shall be large enough to enable proper physical distancing, and such individuals must comply with these distancing requirements.
  - The Club's catering staff may provide pre-packaged meals in individual containers for each Player to be picked up while the Player is at the facility. Pre-packaged meals may be consumed at the Club's facility, or may be taken home and consumed at the Player's residence.
  - All beverages shall be provided in individual bottles, whenever possible.
  - Kitchen staff preparing the food and staff delivering the meals shall wear masks, gloves, hair and beard covers, aprons, etc.
- Automatic hand sanitizer stations shall be set up at the entrance of the meal room, as well as stationed at various locations throughout the meal room. Individuals should sanitize their hands before and after eating or drinking in the designated meal room.
- Use of water bottles during practice and game play shall remain covered by the requirements set forth in the Cleaning and Disinfecting Requirements.
- Procedures relating to the provision of food and beverages during Club travel are set forth in the Travel Protocol, including that during team meals, individuals may remove face coverings while eating so long as social distancing is maintained.



- Supplements may not be provided in common containers; scoops shared by individuals are prohibited. Supplements can be provided as follows:
  - In single-dispense packs.
  - Use of a common “tub” or container to be permitted when one individual accesses and dispenses from the tub/container, such as a strength & conditioning coach or other member of the Club’s training staff.
  - Larger tubs may also be assigned to individual Players, labeled by name and number, and each such Player shall access and dispense from his own tub.
- For specific guidance on food & beverage for fans, please see the Guest Experience Protocol.

## L. MONITORING REQUIREMENTS

Monitoring and testing by their nature are for the purpose of early detection of infection and are not replacements for the hygiene, distancing and cleaning methods outlined in this Protocol that can help prevent infection in the first instance.

The below provisions regarding screening and testing are applicable to all Club personnel, including Players, in Groups 1 and 2(A).

### **SYMPTOM AND TEMPERATURE CHECKS** //////////////////////////////////////

#### **CLUB PERSONNEL IN GROUPS 1 AND 2A**

Each Club is required to use the EDGE 10 symptom and temperature monitoring application to record symptoms and conduct temperature self-checks on a daily basis for all Group 1 and 2(A) Club individuals (including Players), and shall provide access to the centralized dashboard of responses only to Club Medical Personnel.

Club individuals in Groups 1 and 2(A), including Players, shall self-administer such checks at their homes (or hotel) not more than two (2) hours prior to their entry to the Club facility. Clubs shall obtain any necessary equipment, including digital oral thermometers, for use by Players and such other Club personnel that are subject to these requirements. See Form Section herein Section M (Symptomatic Individuals and Positive Test Handling), below, which sets forth processes if Players or Club personnel develop symptoms, report a temperature >100.4°F or > 38°C, or are otherwise directed by the standardized self-screening checklist to follow the symptom-reporting procedure. Additionally, each Club must continue to administer a separate temperature and symptom check at the entrance of each Club Facilities before any members of Groups 1 and 2(A) shall be allowed to enter. No one shall be permitted to enter the Club Facilities who has any COVID-19 symptoms, or a temperature >100.4°F or > 38°C, without first being examined by Club Medical Staff, who may ultimately determine that such symptoms are attributable to other causes. Temperature checks shall be conducted using a non-contact infrared thermometer. Any abnormal result using the non-contact infrared thermometer must be followed up with a confirmatory check using a tympanic membrane or hospital-grade oral thermometer. Clubs shall take appropriate measures to protect the privacy and maintain the security of the information collected. The information collected shall not be entered into the Player’s AHMS records and shall be kept in a separate subfile, but shall be made available to the Player and the Club doctor in the event that he becomes symptomatic and/or tests positive for COVID-19.



Please note that individuals in Canada who are NIE recipients are required by law (MIO s. 3(1)(c)(i)) to self-monitor for symptoms every day for their first 14 days, and this clock resets if anyone develops symptoms (3(2)). While the above-stated symptom checks are NHL requirements under this protocol, it is of particular note that these are also requirements by law in Canada.

## **OTHER INDIVIDUALS IN GROUPS 2(B)-5**

A process shall be implemented, via electronic means or otherwise, with respect to the screening (and secondary screening and isolation area, as well as exit pathways, if needed) of the other individuals in Groups 2(B)-5 who will be providing services at, or otherwise entering, the Club Practice Facility or the Club Game Arena. Such screening shall comply with applicable local and federal regulations, including, at a minimum, certification that each such individual, and their household members and close contacts:

- Are not newly experiencing any symptoms associated with COVID-19;
- Have not been diagnosed with COVID-19 in the past 14 days; and
- To their knowledge, have not been exposed to COVID-19 in the past 14 days.

Individuals answering yes to any of the above questions shall not be permitted to enter the Club Facilities. Depending on local restrictions (such as a travel quarantine in place), Clubs may seek to include additional screening questions related to recent travel to other States and/or Countries. The Club is responsible for establishing and executing such processes for all Club staff; the Facility Compliance Officer is responsible for establishing and executing such processes for all other individuals. To the extent the screening occurs on site (as opposed to prior to arrival via an app or other certification process), this process shall ensure for appropriate distancing between individuals in the queue for screening, including proper signage and security to facilitate education and compliance.

## **TESTING** //////////////////////////////////////

### **CLUB PERSONNEL (GROUP 1 AND GROUP 2A)**

As an over-riding principle of the NHL’s testing program, testing of asymptomatic Players and Club personnel must be done in the context of excess testing capacity so as not to deprive health care workers, vulnerable populations and symptomatic individuals from necessary diagnostic tests. Further, testing by its nature is for the early detection of infection and is not a replacement for the hygiene, distancing, and cleaning and disinfecting methods outlined in this Protocol that can help prevent infection in the first instance.

The below provisions set forth the testing requirements applicable to Club personnel, including Players, in Groups 1 and 2A.

### **RT-PCR TESTING**

In order to detect active or recent infection, laboratory-based RT-PCR<sup>9</sup> testing shall be administered to all Players and Club personnel in Groups 1 and 2A (see Section E). The testing shall be administered:

- Forty-eight (48) hours prior to any person’s initial return to Club Facilities, and, thereafter, on a daily basis.

- Daily testing shall be in effect for the duration of Training Camp and for the first four (4) weeks of the NHL Regular Season. Upon the conclusion of the first four (4) weeks of the Regular Season, the Parties will re-evaluate the requirement for daily testing and will determine whether to transition to testing in Club market(s) on an every other day basis. The Parties shall consult with their respective medical personnel and their infectious diseases specialists in making this decision and shall consider the history of positive tests at Club, League, and community levels.
  - In the event that a Club is unable to obtain testing or lab resources sufficient to implement daily testing as described above, a Club will be permitted to administer laboratory-based RT-PCR testing on an every-other-day basis and, on days on which such testing is not administered, it shall administer Rapid Point-of-Care PCR testing to persons entering Club Facilities, to the extent such testing is available (Health Canada or FDA authorized).
- **NOTE:** Individuals in Groups 1 and 2A who do not regularly access the Restricted Areas of the Club facilities shall receive a negative result 24 hours before each such occasion of access, or for certain game day personnel such as Locker Room Attendants or X-Ray Technicians, POC testing on game days.
- Each Club shall report to the League [REDACTED] on an occurrence basis any positive tests for Group 1 and Group 2A personnel.
- **NOTE:** as per the Symptomatic Individuals and Positive Test Protocol for Club Personnel (including Players), persons who have received a confirmed positive for COVID-19 shall not be re-tested for 90 days after their first positive test. Upon completion of this 90-day window, individuals shall be tested as part of the testing program again.

## POC MOLECULAR TESTING

There are many forms of point of care (POC) testing. More recently, POC Molecular (PCR) testing in the form of the MESA ACCULA test has been developed and has been found to be highly sensitive. As this testing becomes more prevalent and available to Clubs, it will be incorporated into this Protocol as stated above in the RT-PCR Section.

## ANTIGEN TESTING

Antigens are proteins present on the outside of a virus. Antigen tests look for these proteins in a clinical sample to determine if the virus is present. Antigen tests do not amplify the sample, so the sensitivity of antigen tests is significantly less than that of PCR tests. Antigen tests are most useful when individuals are symptomatic with COVID-19, as they are usually shedding high volumes of virus when symptoms are present. Unfortunately, antigen tests do not perform well when individuals are shedding lower volumes of virus. Recent medical findings call into question the utility of antigen testing in the asymptomatic population. Therefore, we believe currently existing antigen tests are inadequate for surveillance or screening purposes.

<sup>9</sup> This RT-PCR testing can be done with one patient's swab per test, or can employ "pooling" if approved by the laboratory doing the testing. Pooled testing is a diagnostic strategy wherein a laboratory will combine respiratory specimens from multiple people and conduct one microbiological test on the combined pool of samples to identify SARS-CoV-2. This strategy is used to decrease the use of materials and costs. Pooled testing can only be performed in CLIA-certified laboratories using a testing platform that has received FDA EUA specifically for pooling. To date, 10 test strategies have been approved for pooled testing



In the event that no PCR testing is available due to lack of, or prioritization of, laboratory resources, FDA or Health Canada approved antigen testing will be considered as an alternative.

## **SEROLOGY (ANTIBODY) TESTING**

Antibody testing looks for antibodies specific to COVID-19 in a blood sample, and is therefore referred to as a serology test. At this point, we cannot say with certainty that a positive antibody test means you cannot contract COVID-19. We also cannot say whether or not you may be transiently contagious if you're re-exposed to COVID-19. As such, there are no "immunity passports" arising out of antibody testing.

Should Clubs elect (or Players request) to do serology testing, such testing should be an FDA, NIH or Health Canada approved serology test. For clarity, the FDA process must have progressed through approval, not only emergency use authorization (EUA). Currently, the extent to which a positive antibody test signifies immunity is not known, and we therefore strongly recommend against relying in any way on the outcome of such test. At a minimum, all Players and Club personnel should continue to practice the same prevention measures outlined in this document, regardless of the results of antibody testing.

## **GROUP 2B**

Refer to League Personnel Protocol.

## **OTHER INDIVIDUALS IN GROUPS 2C-5**

Clubs shall determine, in conjunction with local health authorities, if they will administer a testing program for Groups 2C-5.

## **PCR TESTING FOR PLAYERS' FAMILIES**

Each Club's Services personnel will make best efforts to provide Player families and all household members with logistical support for and access to PCR testing, when requested, in the Club's city. Such testing will be at the Players' cost. In the event, however, that a Player tests positive, the Player's family if deemed to be "Close Contacts," shall also be tested daily for a period of 14 days.

## **NONCOMPLIANCE WITH MONITORING AND TESTING REQUIREMENTS //**

Individuals, including Players, who fail or refuse to follow their testing and monitoring requirements shall be prohibited by the Club or League, as applicable, from continuing to participate in their job functions or in any Club Training Activities.

## **COLLECTION, STORAGE, AND USE OF HEALTH INFORMATION //**

The League and the Clubs shall take appropriate measures to protect the privacy and to maintain the security of the individuals' health information collected in accordance with applicable laws.







**GROUP 5 INDIVIDUALS** //

Any individuals in Group 5 who develop symptoms and/or have a positive test should immediately self-isolate (go home or stay home), and contact their medical provider. They shall not be permitted to enter the facility until consistent with entry screening procedures, and local health care and the CDC, Health Canada and/or the PHAC regulations.

Any Players or Club Personnel who develop symptoms should immediately self-isolate and contact their Club Doctor or Trainer. They should promptly be evaluated medically by the Club's physician(s), who shall consult with the Club ID Consultant to determine next steps, and to administer PCR testing, if appropriate. Further, all Players and Club personnel must also immediately notify Club medical staff if they suspect that they have come into contact with someone who has COVID-19.

Provisions governing Club Group 1 and 2A individuals who develop COVID-19 related symptoms, and/or who test positive, are described in detail in the Positive Test Protocol.

## **N. CLEANING AND DISINFECTING OF PRACTICE AND GAME-SPECIFIC AREAS**

Each Club shall continue to adhere to the requirements for regularly cleaning its facilities (i.e., practice and game arenas, as set forth in the attached 2020/21 NHL/NHLPA Medical Handbook 4.2 "Cleaning and Disinfecting Requirements," (revised, November, 2020). Please note that these Requirements have been updated to include specific guidance regarding the maintenance and use of water bottles, towels, hand cleaners, tissues, anti-bacterial wipes and gloves, and a recommendation for the use of electrostatic sprayers. These standards are consistent with CDC recommendations on actions to help prevent the spread of respiratory diseases, including the coronavirus. (See **How to Protect Yourself and Others**)

Clubs who have concerns about their ability to obtain sufficient amounts of cleaning and disinfecting solutions shall contact the League promptly [REDACTED].

At a minimum, this cleaning must be completed:

1. Prior to re-opening any Club facility;
2. On shared circuit-based training equipment between each Player usage (e.g., disinfectant wipe-down);
3. Between small group training sessions on all areas and equipment that are touched; and
4. At the end of each day.

Further, if any area of the Club facility that Groups 1 or 2A access (e.g., washrooms, training equipment, kitchen, etc.) is accessed by any Group 3 personnel during hours when the Players are not in the Club facility, each such area must be thoroughly and completely cleaned and disinfected prior to the next usage of such area(s) by the Group 1 and 2A individuals.

Clubs must ensure qualified professional cleaning personnel are retained to implement these requirements, and that all cleaning staff are provided, and understand, the requirements of the Medical Handbook as it pertains to the cleaning and disinfection of the Club's facility.

To the extent possible, and as resources allow, Club facilities shall be automated or made as “no-touch” as practicable, to reduce or remove the use of high touch areas (push-bar entrances, key-fob entry, etc.).

Clubs shall also refer to the recommendations and considerations in the 2020/21 Season Mechanical HVAC-R Policy. Clubs shall ensure that the correct venue operations individuals receive and review.

## O. PESP TESTING

CDT will perform no-notice urine collections for prohibited substances during the 2020/21 NHL Season, with appropriate precautions as necessitated by COVID-19. CDT collectors are subject to a variety of precautionary measures, including mandatory daily symptom and temperature monitoring as well as routine COVID-19 testing. Additionally, CDT collectors will implement COVID-19 protocols at the Club facility including setting up socially distanced collection and waiting areas, frequent disinfection of all collection site areas, and use of PPE (nitrile gloves, gown/lab coat, face mask, and face shield). All Clubs should review and familiarize themselves with the **CDT Collection Preparation & Procedures** to understand certain procedures Clubs shall implement in order to provide a safe collection site within the facility for CDT collectors and Players.

The CBA provides for every Player who has participated in an education session to be subject to team-wide no-notice testing once during Training Camp. The PESP training sessions provided by Drs. Lewis, Shaw, and Dan Cronin, which in the past have been provided in-person for each Club at the start of each season, will be provided virtually for the 2020/21 NHL Season. It is therefore recommended that Clubs include in this educational session all Players on the Club’s Reserve List, who are under contract to the Club. As usual, all Players shall sign a form acknowledging they have received the educational session. Players are not eligible for PESP testing until they have received the educational session.

Details and sign-in sheets for the virtual education session will be provided to Clubs in a separate communication

## P. COMPLIANCE AND GOVERNANCE

Adherence to the provisions in this Protocol and a level playing field will be important both during Training Camp and throughout the NHL Season for the purpose, most importantly, of maintaining the health and safety of Players and Club personnel, as well as to maintain the integrity of competition among the Clubs. This Protocol sets forth a layered approach: no one aspect can stand on its own. Established violations of, and/or lack of compliance with, the COVID-19 Protocol will result in significant Club and individual sanctions, including potential forfeiture of games, fines and reimbursements of expenses, loss of draft choices, and/or ineligibility for participation in Training Activities.

Concerns regarding compliance with the COVID-19 Protocol requirements shall be reported to the Club’s Facility Compliance Officer, and may also be reported directly to Bill Daly or Julie Grand. Players may also contact their NHLPA Divisional Player Representatives if they have concerns regarding compliance with the provisions of this Protocol.



## ***Circumstances for Postponement, Delay, or Cancellation of Training Camp and/or the NHL Season***

If, at any time either before the commencement of, or during, the 2020/21 NHL Season (including Training Camp), either the NHL or the NHLPA believes that conditions, in which the commencement or continuation of Training Camp or the NHL Season would likely create or exacerbate a material risk to Players' or others' health and safety and/or jeopardize the integrity of the competition anticipated during the 2020/21 Season, are imminent or may have emerged, which conditions may include an uncontrolled outbreak of COVID-19 in the Players of one or more Clubs, that party shall immediately notify the other of its belief, following which the parties shall jointly consult with the NHL Chief Medical Officer, the NHLPA Medical Consultant, participating Players, General Managers, and such infectious diseases experts as they may consider advisable. Thereafter, the Commissioner (or a person designated by him) shall make a determination after consultation with the Executive Director of the NHLPA (or a person designated by him), whether to postpone, delay, move or cancel Training Camp or the NHL Season. The basis upon which the Commissioner is to make his determination, to postpone, delay, move, or cancel Training Camp or the NHL Season, shall be whether the commencement or continuation of Training Activities or the playing of League Games would likely create or exacerbate a material risk to Players' or others' health and safety and/or jeopardize the integrity of the League's competition. If the NHLPA is dissatisfied with the determination of the Commissioner, it may contest the matter in the form of an expedited arbitration of a Grievance before the Impartial Arbitrator pursuant to Section 17.17 of the Collective Bargaining Agreement.



***SAMPLE SIGNAGE  
& FORMS APPENDIX***



## ***COVID-19 WARNING***

In connection with the 2020-21 NHL season, we have taken enhanced health and safety measures intended to mitigate the risk of exposure to COVID-19. Despite the protocols and requirements that we have put in place, no precautions can eliminate the risk of exposure to COVID-19.

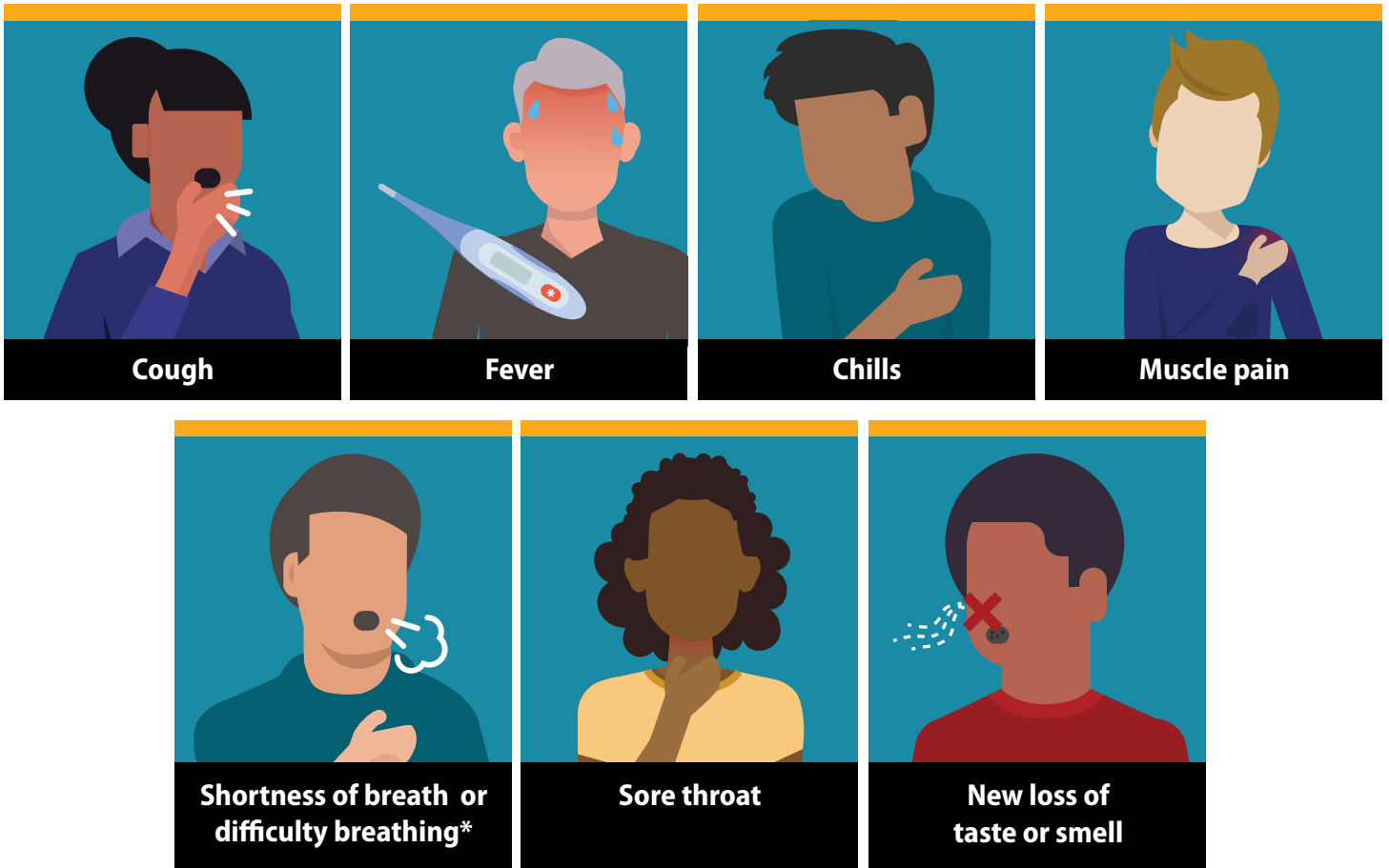
Traveling to and from, visiting, and/or providing services in and around the arena may lead to a risk of exposure to COVID-19.

COVID-19 is highly contagious and there is an inherent risk of exposure to COVID-19 in any place where people are present. COVID-19 can lead to severe illness and death. While people of all ages and health conditions have been adversely affected by COVID-19, certain people have been identified by public health authorities as having greater risk based on age and underlying medical conditions. Exposure to COVID-19 can result in being subject to quarantine requirements.

Please do your part by complying with our health and safety rules and let's keep each other safe and healthy.

# Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:



Symptoms can range from mild to severe illness, and appear 2-14 days after you are exposed to the virus that causes COVID-19.

**\*Seek medical care immediately if someone has emergency warning signs of COVID-19.**

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.



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[cdc.gov/coronavirus](https://cdc.gov/coronavirus)

# How to Protect Yourself and Others

## Know how it spreads



- There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19).
- **The best way to prevent illness is to avoid being exposed to this virus.**
- The virus is thought to spread mainly from person-to-person.
  - » Between people who are in close contact with one another (within about 6 feet).
  - » Through respiratory droplets produced when an infected person coughs, sneezes or talks.
  - » These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
  - » Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

## Everyone should

### Clean your hands often

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- **Wash your hands** often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- If soap and water are not readily available, **use a hand sanitizer that contains at least 60% alcohol.** Cover all surfaces of your hands and rub them together until they feel dry.
- **Avoid touching your eyes, nose, and mouth** with unwashed hands.

### Avoid close contact

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- **Stay home if you are sick.**
- **Avoid close contact** with people who are sick.
- **Put distance between yourself and other people.**
  - » Remember that some people without symptoms may be able to spread virus.
  - » This is especially important for **people who are at higher risk of getting very sick.** [www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html)

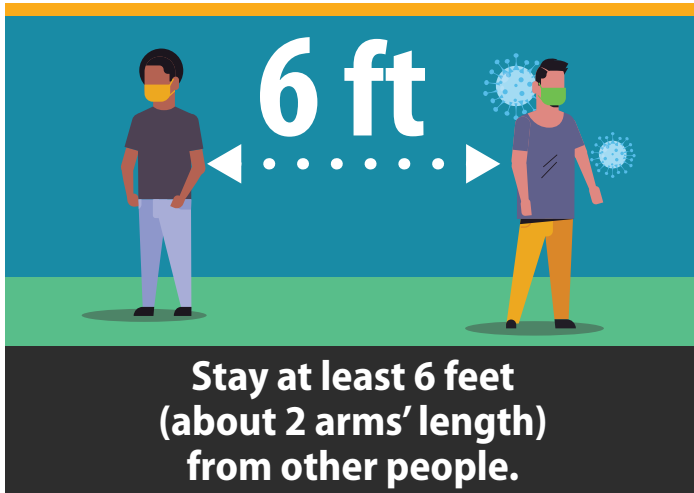


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[cdc.gov/coronavirus](https://cdc.gov/coronavirus)

# Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.



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[cdc.gov/coronavirus](https://cdc.gov/coronavirus)



# DO choose masks that



**Have two or more layers of washable, breathable fabric**



**Completely cover your nose and mouth**



**Fit snugly against the sides of your face and don't have gaps**



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[cdc.gov/coronavirus](https://cdc.gov/coronavirus)

# FORM 1 CERTIFICATION



## NHL 2020/21 TRAINING CAMP AND REGULAR SEASON CLUB COMPLIANCE OFFICER REPORTING CERTIFICATION

Please return via email \_\_\_\_\_ by each  
successive Friday of the 2020/21 Season.

I, \_\_\_\_\_, Club Compliance Officer of the \_\_\_\_\_  
[Club name]

hereby certify that: \_\_\_\_\_

- Players and all other Club Personnel received the required PCR testing;
- Players and all other Club Personnel completed their daily symptom screening and temperature check;
- Players and all other Club Personnel wore face coverings and were distanced in all required situations; and
- Personnel in Groups 1 and 2 did not have in-person interactions in the Club facilities with personnel in Groups 3, 4 or 5 while at home or on the road.

**OR**

- Certain of the requirements in the NHL 2020/21 Training Camp and Regular Season COVID-19 Protocol have not been satisfied and the Club is not in compliance with all requirements.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

In the event there are any circumstances of non-compliance, the Club Compliance Officer shall submit a Report of Non-Compliance detailing the circumstances giving rise to the non-compliance immediately via Form 2.

# FORM 2 NON-COMPLIANCE REPORT



## NHL 2020/21 TRAINING CAMP AND REGULAR SEASON CLUB COMPLIANCE OFFICER REPORT OF NON-COMPLIANCE

Please return via email

I, \_\_\_\_\_, Club Compliance Officer of the \_\_\_\_\_  
[Club name]

hereby notify the League that:

The \_\_\_\_\_ are not in compliance with the following requirements  
(please also provide details of the non-compliance as well as how each issue will be  
resolved and by when):

1. Issue

Resolution / Plan Timing

# **FORM 2 NON-COMPLIANCE REPORT**



2. Issue

Resolution / Plan Timing

3. Issue

Resolution / Plan Timing

# FORM 2 NON-COMPLIANCE REPORT



4. Issue

Resolution / Plan Timing

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Signature

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Print Name

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Date

# FORM A- CERTIFICATION FACILITY COMPLIANCE OFFICER



## NHL 2020/21 TRAINING CAMP AND REGULAR SEASON FACILITY COMPLIANCE OFFICER REPORTING CERTIFICATION

Please return via email  
by each successive Friday of the 2020/21 Season.

I, \_\_\_\_\_, Facility Compliance Officer of the \_\_\_\_\_  
[Club name]

hereby certify that for: \_\_\_\_\_  
[Facility name]

[check one of the following]:

- Each of the requirements in the NHL 2020/21 Training Camp and Regular Season Protocol has been satisfied and the Club is in compliance with all requirements.
- Certain of the requirements in the NHL 2020/21 Training Camp and Regular Season Protocol have not been satisfied and the Club is not in compliance with all requirements. Please make a note below as to what the deficiencies are, and when they will be resolved.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

# FORM A- CERTIFICATION CLUB COMPLIANCE OFFICER



## NHL 2020/21 TRAINING CAMP AND REGULAR SEASON COVID-19 PROTOCOL EDUCATION CERTIFICATION

Please return via email

by the first Monday of Training Camp.

I, \_\_\_\_\_, Club Compliance Officer of the \_\_\_\_\_  
[Club name]

hereby certify that the below individuals viewed the COVID-19 Education Session.

**This is to confirm that I participated in the COVID-19 Protocol education provided by the Club Medical Director and Head Athletic Trainer prior to beginning Training Camp.**

\_\_\_\_\_  
(Player) Print Name

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# EDUCATIONAL CERTIFICATION



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(Club Neuropsychologist) Print Name

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(General Manager) Print Name

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