

BASKETBALL New Zealand

COVID-19 RETURN TO TRAINING AND COMPETITION GUIDELINES

Framework for a Safe Return to Training and Competition for Coaches and Players

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INTRODUCTION

GENERAL OVERVIEW OF COVID-19 AND THE IMPACT ON SPORT

The outbreak of Coronavirus disease (COVID-19) around the world was declared a global pandemic by the World Health Organization (WHO) on February 11, 2020.¹ COVID-19 is described as a viral illness that can that can affect not just your lungs and airways but most organs in the body, spreading from person to person with close physical contact, coming into contact with virus-contaminated surfaces, and from respiratory droplets when an infected person coughs, sneezes, or talks.¹-³ The viral illness can be asymptomatic, mild or result in hosptilatisation, some requiring life support and in a small number of cases multiorgan failure and death. At the time of writing this document there are over 300000 deaths worldwide.

COVID-19 has resulted in youth, academic and professional sport in New Zealand,⁴ and around the world suspending play and competitive seasons, as well as structured in-season and off-season training for all sports. In particular, the National Basketball Association (NBA) suspended the season on March 11, 2020, after NBA player Rudy Gobert tested positive for COVID-19,⁵ with NBA Commissioner, Adam Silver, initially reporting that the season suspension would last at least 30 days. However, more recent reports suggest that a mid-to-late-June return is likely the best-case scenario.⁶ This pivotal decision set off a chain of events that led to the postponement of several high-profile team sport events, including the NCAA men's and women's tournaments, the NHL season, MLB's spring training, the English Premier League season, La Liga season, Bundesliga season, Serie A season, UEFA's European Championship, and Ligue 1 season, to name a few.

This has led to an uncertain future, with National Basketball Leagues, across the globe facing unprecedented times which require diligent analysis, evaluation, and preparation to cope with the altered schedule, and the potential deconditioning of players. As such, the *Guidelines for Safe Return to Training and Competition for Coaches and Players* have been developed by Basketball New Zealand as a direct response to the COVID-19 pandemic. In accordance these guidelines support the Sport New Zealand, *Balance is Better National Sport Season Transition Guidelines*.

1. IMPLICATIONS OF COVID-19 ISOLATION ON PLAYER READINESS

EFFECT OF DETRAINING DUE TO COVID-19 ISOLATION

The principle of training reversibility states that stopped or markedly reduced training induces a partial or complete reversal of the previous developed adaptations, ¹⁰ thus compromising athletic performance. The reversibility principle is also known as detraining. ¹¹ When determining the effect of detraining from a variety of sports, ^{11, 12} National Basketball Leagues (NBL) executives, coaches and support staff must take into account the necessary (re)training time ('minimum effective dose') required for players to regain optimal physical conditions and maintain or at least attenuate the decay of endurance- and neuromuscular-related performance parameters upon return to training and competition. ¹³ Coaches and support staff should remain alert for potential risk of injury during the return to training stage for the following three key reasons:

- 1. Almost 60% of noncontact injuries have been reported during periods in which collegiate athletes transitioned back into training following a period of inactivity (e.g., after vacation).¹³
 - a. *National Football League (NFL) lockout (2011)*: Resulted in a significant increase in achilles tendon ruptures in the following shortened preseason.¹⁴ Twelve achilles tendon ruptures occurred in 1-month, with 10 over the first 12-days of the preseason.
 - b. *National Basketball Association (NBA) lockout (2011)*: Experts warned of similar lockout injuries following the 149-day NBA lockout. ¹⁵ Games resumed Dec 25, 2011, by Jan 8, 2012, 19 key players across the league had already lost time to injury.
- 2. Cardiovascular fitness loss may occur as soon as 4 weeks of detraining; 16 with overall ~10% each week of total inactivity can be generally expected; 17 and
- 3. Loss of lean mass and muscle strength represents an important injury risk factor.¹⁷ As a simple rule an increase of training load of more than 10% per week more than doubles the injury risk over smaller increments in training load and represents 40% of the entire seasons injury risk.¹⁸

Moving forward through this uncertain period of time, it is recommended that athletes, coaches and support staff anticipate various plausible scenarios, such as: team practice time constraints upon return to competition, limited accessibility to fitness and rehabilitation equipment, prolonged social and physical distancing, financial deficits, limited personal space.

PLAYER LOAD MANAGEMENT

In light of concerns surrounding the physiological and psychological demands associated with a condensed NZNBL season, and the potential injury risk during retraining,¹⁴ load management, although a controversial issue across elite sport, is a primary consideration for game and training dose decisions,⁸ and can be quantified by various methods (see Figure 1). Progressive overload is the gradual and systematic increases in training load to maintain and/or, achieve continued positive training adaptation.¹⁰ The rate of progression is an extremely important consideration; as progressing too rapidly can result in injury while progressing too slowly will delay fitness gains.



Figure 1. Methods of quantifying training load for various training modalities.

The "50/30/20/10 rule" spanning over a 4-week training period may serve as a useful baseline approach to individual and team load management, as outlined in a Joint Consensus Paper by the National Strength and Conditioning Association (NSCA) and Collegiate Strength and Conditioning Coaches Association (CSCCa).¹³

With the reintegration of players into the training environment, it is advised to reduce the overall conditioning volume by at least 50% of the uppermost planned conditioning volume in the first week following inactivity, and reduce by 30% (week 2), 20% (week 3), and 10% (week 4), with a **1:4 or greater work:rest ratio** in the first week. This would then see players completing the fully planned load in week 5. Theoretically, such approach to progressive overload may assist with the lead management of players during reintegration into the training environment. Please see basketball-specific considerations outlined in the example 5-week return to training and competition plan (Table 1).

TABLE 1. EXAMPLE 5-WEEK RETURN TO TRAINING AND COMPETITION PLAN: BASKTEBALL-SPECIFIC CONSIDERATIONS

| Week | Training Goal | % of Uppermost Planned Training Volume | Basketball-specific considerations |
|------|-------------------------------------------|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | Reintegration to the training environment | Actual training volume to equal 50% reduction uppermost planned training volume | 2-3 training sessions per week 1x court-session per day Session duration ≤ 60 minutes Non-consecutive days on court No contact work No competitive work Plyometric training ≤ 40 reps Level 1/2 jump landings |
| 2 | Returning to train | Actual training volume to equal 30% reduction uppermost planned training volume | 3-4 training sessions per week 1x court-session per day Session duration 60-75 mins Non-consecutive days on court Introduce contact work < 20% of session time Introduce competitive work < 20% of session time Introduce deceleration drills < 20% of session time Plyometric training < 40 reps Level 2/3 jump landings |
| 3 | Returning to train | Actual training volume to equal 20% reduction uppermost planned training volume | 4-6 training sessions per week 2 days on / 1 day off 2x court-sessions per day Session duration ≤ 75 mins Contact work 25% of session time Competitive work 25% of session time Deceleration drills 25% of session time Plyometric training 60 reps Level 3/4 jump landings |
| 4 | Returning to play | Actual training volume to equal 10% reduction uppermost planned training volume | 4-6 training sessions per week 2 days on / 1 day off 2x court-sessions per day Session duration ≤ 75 mins Contact work ≤ 20% of session time Competitive work ≤ 20% of session time Live play situations ≤ 20% of session time Deceleration drills ≤ 20% of session time Plyometric training ≤ 60 reps Level 4/5 jump landings |
| 5 | Returning to play | Actual training volume equal uppermost planned training volume | Manipulate training components as required to meet player needs |

Plyometric progression guide: Level 1/2 = Jumps in-place; Level 2 = Standing horizontal jumps; Level 3 = Multiple jumps (bilateral hopping/jumping); Level 4 = Box jumps; Level 5 = Bounding. 19, 20

2. KEY CONSIDERATIONS FOR SAFE RETURN TO TRAINING AND COMPETITION

FRAMEWORK FOR RESUMPTION OF SPORT

The safe return to sport of elite athletes in a COVID-19 environment will be a complex process. The Australian Institute of Sport Framework²¹ provides minimum baseline of standards for 'how' high performance/professional sport activities can be reintroduced based on the best available evidence to ensure the safety of athletes/other personnel and the wider community (Figure 2). Four key areas include, (1) Preparation for sports resumption; (2) Proposed criteria for resumption of sporting activities; (3) assessment athletes and other personnel products resumption of formal training; and (4) Ongoing monitoring and management of athletes and other personnel. Parliamentary and/or Local Public Health Authorities must be closely consulted in decisions regarding the resumption of 'when' high performance/professional sport activities. All individuals and sport organisations must follow directions of the Local Public Health Authorities.



Figure 2. AIS Framework for resumption of sport in a COVID-19 environment.²¹

RECOMMENDED ASSESSMENT OF ATHLETES AND SUPPORT STAFF PRIOR TO RESUMPTION OF TRAINING AND COMPETITION

An athlete and/or support staff **must not** join the training environment if in the **last 14 days** they have been unwell or had contact with a known or suspected case of COVID-19. Sport organisations must be proactive and ensure all athletes/staff have been medically cleared prior to return to the training environment (Figure 3).²¹

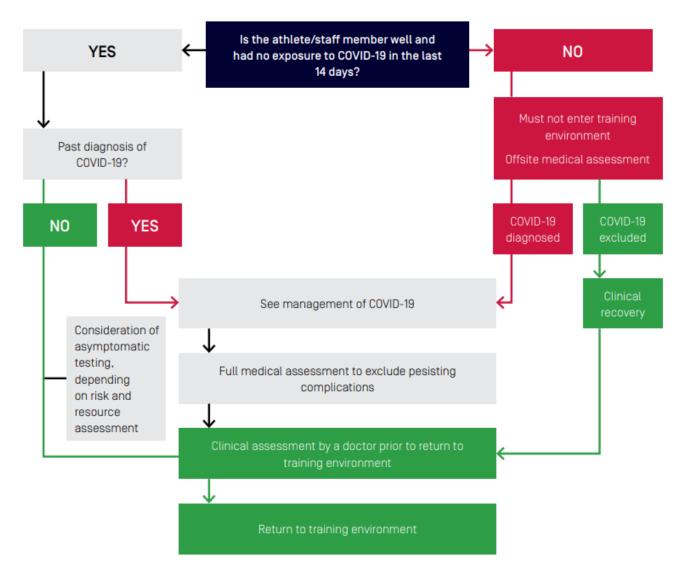


Figure 3. The recommended process for medical clearance of athletes and support staff, as per the Australian Institute of Sport framework.²¹

3. RETURN TO TRAINING AND COMPETITION PLAN – NATIONAL BASKTEBALL LEAGUE

KEY CONSIDERATIONS

It is recommended that all clubs address the steps outlined in the *Reintegration, Planning, Returning* process.

1. REINTEGRATION to the training environment

- a. COVID-19 Checklist
 - i. COVID-19 Symptom checker
 - ii. COVID-19 Hygiene protocols
- b. Player musculoskeletal screening
 - i. Performed by: Medical staff (Physiotherapist)
 - ii. Aim: Determine if the athlete is currently injury free and ready to return
- c. Player physical and sport-related testing
 - i. Performed by: Performance staff (Strength and conditioning coach)
 - ii. Aim: Determine athletes current physical performance capacity and ready to return
- d. Team Weekly Update Report
 - i. Send to NBL
- e. Basketball-specific training considerations
 - See Table 1.

2. PLANNING to train/play/compete

- a. Team training
 - i. Training load quantification
 - ii. Athlete monitoring and daily wellness reporting
 - iii. Recovery modalities
 - Neural
 - Muscular
 - Psychological
 - Nutrition
- b. Strength and conditioning
 - i. Individualized player approach
 - ii. Identified strength deficits
 - iii. Mico-dosing principle
 - Maximal strength
 - Change of direction
 - Jump training
 - Specific Endurance
 - Contact Training

- c. Physiotherapy
 - i. Individualized player approach
 - ii. Identified athlete currently injury status
 - iii. Injury prevention programming
 - GetSet app
 - Basketball prehab program
- d. Team Weekly Update Report
 - i. Send to NBL
- e. Basketball-specific training considerations See Table 1.

3. RETURN to training/play/competition

- a. Competitive demands
 - i. Training load quantification
 - ii. Athlete monitoring and daily wellness reporting
 - iii. Recovery modalities
- b. Team Weekly Update Report
 - i. Send to NBL
- c. Basketball-specific training considerations
 - See Table 1.

4. CONCLUSION

The current focus of the Basketball New Zealand guidelines is the safe return to training and competition for coaches and players in a condensed 2020 season of the New Zealand National Basketball League (NZNBL). At the forefront, is the health and well-being of all involved. This deals with both the prevention of viral spread through common COVID-19 hygiene measures, and the physical and psychological preparation of players to compete in the condensed 2020 NZNBL.

We acknowledge the logistical constraints, and the difficulty to implement sport-specific exercise strategies under previous New Zealand alerts levels have made it difficult to provide training solutions comparable to those adopted under normal circumstances.

Basic objective assessments and ongoing subjective monitoring is likely the best avenue to determine players readiness following reintegration to the training environment and during the returning to training/play phase. This provides an opportunity to individualize, recommend, implement, and modify daily training loads. Recovery strategies addressing muscular, neural, psychological, substrate recovery such as sleep hygiene, best nutrition practice, and psychological mindfulness have potential to improve athlete health and performance. Training strategies such as micro-dosing exercise and prehabilitation, focused on high risk areas may improve physical and psychological readiness of players.

With the proposed guidelines providing a framework for injury risk minimization and safe return to training and competition for the players, further to this, sports medicine providers are aware of common COVID-19 symptoms and testing protocols as indicated by local resources, in the event of a positive case to minimize spread among teams.²²

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APPEDNIX I

HEALTH CONSIDERATIONS FOR NEW ZEALAND ATHLETES RETURNING TO TRAINING AND/OR COMPETITION DURING THE SARS-COV-2 PANDEMIC

COVID-19 is a disease caused by the coronavirus SARS-CoV-2. Since late December 2020, SAR-CoV-2 has resulted in large number of infections and deaths worldwide.

There is increasing evidence that in addition to the lungs, COVID-19 may affect organs such as the heart, brain and kidneys. While largely unknown, there is concern that impact on these organs may not initially be apparent, and it is not always clear if the risk of multi-organ damage relates to the severity of symptoms.

The following recommendations have been established to minimise the risk to athletes and the broader elite sport community.

During the COVID-19 Pandemic

- Any athlete who presents to training or a training facility with respiratory symptoms or fever must be immediately isolated and assessed by a medical practitioner. No training is permitted until a medical clearance is provided.
- Any athlete who has had any new respiratory symptoms or fever over the last 8 weeks, must be assessed by a medical practitioner prior to intensive training.
 - o Goal: To determine COVID-19 status in potentially infected athletes
- Any athlete who has been tested for COVID-19 must be assessed by a medical practitioner
 - Goal: To ensure the COVID-19 status of the individual is known.
- Any athlete who has tested positive for COVID-19 must be assessed by a medical practitioner prior to resuming training.
 - o Goal:
 - To ensure athletes are safe to resume training
 - To ensure athletes are safe to enter the training environment
- Any athlete known to have underlying medical (eg. Cardiac, renal, respiratory, Hypertension, diabetes) or psychological conditions that may increase their susceptibility to either infection or the impacts of isolation, should be formally assessed by a medical practitioner as part of the return to activity.
 - o Goal: Protection and support of vulnerable athletes
- Any athletes with concerns regarding their health and returning to activity should be able to speak with an appropriate medical or other advisor.

Determining COVID-19 Status and Outcome

- PCR testing is currently utilised in New Zealand for symptomatic individuals and is readily available in most regions.
- There is currently no means anti-body based means in New Zealand to determine whether an individual has been exposed to COVID-19.
- Any athlete suspected of having had COVID-19 (even in the absence of confirmatory testing) should have:
 - A comprehensive history and examination (including neurology)
 - A comprehensive cardiac evaluation (Cardiology, ECG, Echocardiogram)
 - o Routine blood evaluation including haematology, renal and liver function.

How will this work?

- 1. NSO's should work with their Medical Directors to ensure a pathway for monitoring the COVID-19 related health of their athletes.
- 2. All athletes returning to training should complete the attached 'Health Status Questionnaire' (#1) when first returning to training.

Any 'yes' response requires a medical review

3. On a daily basis prior to training, athletes should complete the 'Training Daily Health Check' questionnaire (#2).

Any 'yes' response requires a medical review

APPEDNIX II

HPSNZ COVID-19 PANDEMIC: HEALTH STATUS QUESTIONNAIRE (#1)

Carded athletes returning to training during the COVID-19 Pandemic are required to complete this questionnaire.

| • | Data will be kept confidential, and stor Collated/anonymised data may be utili By completing this form, you agree to | ised for | analytical assessment of HPSNZ | | _ | |
|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------|-------|-----|---|
| Date | >: | | | | | |
| Nam | ie: | | | | | |
| Date | e of Birth: (we need to be able to co | onfirm | identity) | | | |
| NSC |): | | | | | |
| In th | ne last 4 weeks have you been un | well w | vith any of the following sym | ıpton | ns: | |
| | High Temperature/Fever or chills | ; Y | N | | | |
| ` | Cough | Υ | N | | | |
| | Runny Nose | Υ | N | | | |
| | Sneezing | Υ | N | | | |
| | Shortness of Breath | Υ | N | | | |
| | Sore throat | Υ | N | | | |
| | Loss of taste | Υ | N | | | |
| At a | ny time since January 2020, have | you | | | | |
| | Been tested for COVID-19 and it was negative (normal) | | | | Υ | Ν |
| | Been tested for COVID-19 and it | was p | ositive (you had COVID-19) Y | / | Ν | |
| In th | ne last 14 days, have you | | | | | |
| | Been in contact with anyone conf | firmed | or suspected to have COVID- | 19? | Υ | Ν |
| Do you currently feel UNWELL in any way? | | | | / | Ν | |
| Do y | you have any concerns about you N | ır gen | eral health, and risk of COVI | D-19 | ? | Υ |
| | If Yes | | | | | |
| | Have you spoken to your General Practitioner or Medical Specialist regarding your concerns? | | | | our | |
| In th | ne last 14 days, have you had any | inter | national travel? | | Υ | N |

If you have answered YES to any of the above questions, you must contact Healthline free on 0800 611 116 for health advice and information.

APPEDNIX III

HPSNZ COVID-19 PANDEMIC: TRAINING DAILY HEALTH CHECK (#2)

Data will be kept confidential, and stored to facilitate contact tracing and health monitoring. Collated and anonymised data may be utilised for analytical assessment of HPSNZ and COVID-19.

| | Data will be kept confidential, and stored to factorized collated/anonymised data may be utilised for By completing this form, you agree to abid by | analy | tical assessment of HPSNZ and COVID-19. |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------|
| Date | : | | |
| Nam | ne: | | |
| Posi | ition (please circle): | | |
| | Athlete | | |
| | Coach | | |
| | Other (specify). | | |
| Sinc | e you were last training: | | |
| Have | e you been unwell with any of the follow | ving | symptoms: |
| | High Temperature/Fever or chills | Υ | N |
| ` | Cough | Υ | N |
| | Runny Nose | Υ | N |
| | Sneezing | Υ | N |
| | Shortness of Breath | Υ | N |
| | Sore throat | Υ | N |
| | Loss of taste | Υ | N |
| Have | e you been diagnosed with COVID-19? | Υ | N |
| Have 19? | e you been in contact with anyone eithe | er sus Y | spected or confirmed to have COVID-N |
| Do y | ou have any new concerns about your | gene | eral health, and the risk of COVID-19? |
| Υ | N | | |
| | If you have answered YES to any of the Healthline free on 0800 611 116 for | | |

APPEDNIX IV

HPSNZ - BEING SAFE AT WORK DURING THE COVID-19 PANDEMIC

The Government is leading our response to the COVID-19 pandemic and our goal is to ensure we meet national requirements. As we return to onsite operations, it's essential that we minimise exposure to and transmission of COVID-19 on HPSNZ premises. Outlined below are the measures HPSNZ has adopted to prevent, detect, contain and rapidly respond to COVID-19 related risks.

EVERYONE HAS A ROLE TO PLAY

We're all in this together, and whether you're an employee, contractor, athlete, tenant or other visitor to our facilities, there are some general steps you must take to help keep everyone safe:

- Stay at home if you're feeling at all unwell
- Wash your hands frequently with soap and water and/or hand sanitiser
- If you need to sneeze or cough, do so into your elbow or tissue (and dispose of it in a bin)
- Maintain the recommended physical distancing
- Sign in and out when you enter and leave our facilities. We also encourage you to keep a daily record of where you've been, who you've been with and when so that you have this information if needed for COVID-19 contact tracing.
- If you have any concerns about returning to the HPSNZ environment, it is recommended that you speak with your direct line manager or HR. HPSNZ is facilitating the continuation of alternative work practices including working from home when necessary and possible.

Our preference at Level 2 will be for everyone who can work from home to continue to do so – but we recognise that in some instances that won't be possible, and that if Level 2 continues for an extended period of time, it may not be a practical solution. As you'll see, we've established some processes to enable the return to work to happen in a safe manner.

WHAT WE'RE DOING AT COVID-19 ALERT LEVEL 2

At Level 2, COVID-19 is largely contained, but the risk of community transmission remains. Requirements for physical distancing and avoiding non-essential travel remain in place, and alternative ways of working are encouraged. In addition, there is a need for heighted vigilance regarding hygiene, cleaning practices and contact tracing, all of which are addressed below. For more details, please refer to https://covid19.govt.nz/alert-system/.

- While the country remains at Alert Level 2, our focus is on a safe and staged restart. This is not a return to business as usual.
- HPSNZ gyms and performance health centres will be open, but with new protocols in place to restrict access and manage COVID-19 related risks.
- In order to enhance our ability to manage the return to work in a graduated and controlled manner, HPSNZ office spaces and athlete lounges will initially remain closed, and pool cars will not be used.
- HPSNZ forums, functions, programmes and other meetings will continue to be hosted online
 or postponed (unless otherwise approved by SLT). Face to face interactions are permitted
 as set out in this document.

Our general approach to Alert Level 2 is set out below. In addition, and in recognition of the fact that we operate out of seven performance hubs around the country and from a combination of office spaces, performance health centres and gyms, we've included schedules that detail how these safety measures are being implemented in each of these environments.

We'll be reviewing all our safety measures on a fortnightly (or as needed) basis and adjusting where required to ensure that we're responding appropriately and effectively as the pandemic situation continues to evolve. Let your line manager or PTL know if you have concerns or suggestions for improvement.

1. GETTING READY TO RETURN TO HPSNZ FACILITIES

- Everyone entering HPSNZ facilities for the first time since closure will be required to complete an induction. This will include training on our safety measures.
- You must only enter or work from HPSNZ facilities when you've been authorised to do so. You must also only access your designated area with the specific facility.
- Third party access to HPSNZ gyms and performance health centres will be by appointment only. To plan your appointments, liaise with your Performance Team Leader (gyms), the Performance Health Operations Team or relevant practitioner (performance health centres).
- You should not enter any HPSNZ facility or return to work if you have been in contact with anyone diagnosed or suspected to have COVID-19 in the last 14 days (see below for more details).
- If you have had symptoms that may be consistent with COVID-19 over the period of the pandemic, you must obtain a written medical clearance prior to returning to work or entering an HPSNZ facility.
- If you are unwell but do not have COVID-19, you must not enter HPSNZ facilities until you have been symptom free for at least 48 hours.

2. ENTERING AND EXITING HPSNZ FACILITIES

- All entry and exit points will be locked and swipe card access will be disabled.
- Where possible, there will be a single point of entry to each facility.
- You must wash your hands or use the hand sanitiser provided upon entry.
- You will be required to "sign-in" and "sign-out" each time you enter and leave a facility (i.e. office, gym or performance health centre).
- The sign in and out process enables us to contact trace.
- At entry you will also be required to complete a simple health check, designed to ensure that everyone entering HPSNZ facilities is feeling well.

3. WHEN INSIDE HPSNZ FACILITIES

- You must aim to maintain one metre distancing from others. To help with this, each facility
 has set a limit on the number of people who can be present at any one time (see schedules
 for details).
- You must follow designated routes in, out and around our facilities.
- Shower facilities will not be available.
- Common touchpoints (door handles, taps, lift buttons) will be cleaned regularly.
- We have established intensive cleaning strategies for our gyms and performance health centres.

4. PREPARING TO LEAVE HPSNZ FACILITIES

- Before leaving an HPSNZ facility, you must ensure your work area is clear and that you have sanitised your work surfaces (cleaning products will be provided).
- Daily cleaning of common areas will align with MOH guidance.
- Deep cleaning occurs as specified in the schedules.

5. WHAT IF YOU GET SICK OR ARE CONCERNED ABOUT HAVING COVID-19?

- If you have any underlying health problems, are concerned about vulnerable family members or have other health-related concerns related to the COVID-19 pandemic, you should seek advice from an appropriate specialist prior to entering an HPSNZ facility or returning to work. This may include your General Practitioner, medical specialist or other health advisor.
- COVID-19 symptoms may be very mild, and may include any of the following:
 - new/worsening cough
 - high temperature (at least 38C) feeling unusually sweaty or cold
 - shortness of breath
 - sore throat
 - sneezing and/or runny nose
 - temporary loss of smell
- It's important to remember that while your symptoms may be mild, if you give it to someone else, they may become very unwell.

- If you develop any COVID-19 symptoms, please:
 - call Healthline (0800 358 5453) or your GP as soon as possible.
 - follow the advice of your medical practitioner.
 - inform your PTL or line manager. HPSNZ will clean and sanitise in accordance with guidance from the Ministry of Health.
- If you are onsite when you first develop these symptoms, please leave the facility by the most direct route, without interacting with other individuals and then follow the steps above.
- If you are tested for COVID-19 and the test is positive, please continue to follow the advice
 of your doctor and public health officials. You will also be contacted by public health
 authorities to allow for contact tracing to occur. HPSNZ will support public health authorities
 via the entry and exit logs.

APPEDNIX V

FOR MORE INFORMATION ON COVID-19

Websites

New Zealand Government

https://covid19.govt.nz/

New Zealand Ministry of Health

https://www.health.govt.nz/

Worksafe New Zealand

https://worksafe.govt.nz/managing-health-and-safety/novel-coronavirus-covid/

World Health Organisation

https://www.who.int/emergencies/diseases/novel-coronavirus-2019

High Performance Sport New Zealand

Resources relating to Wellbeing, Nutrition and Immunity https://hpsnz.org.nz/covid-19/wellness-for-athletes/

Resources relating to Hygiene and Sanitation Guidance https://hpsnz.org.nz/covid-19/wellness-for-athletes/

BASKETBALL NEW ZEALAND ATHLETE EDUCATIONAL MATERIAL

Infographics

Return to training guidelines

Tips to move from LockedOUT to LockedIN post COVID-19

Player recovery guidelines

Tips to optimise player recovery following return to training

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BASKETBALL NEW ZEALAND RETURN TO TRAINING/COMPETITION GUIDELINES

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