



## **FIPSAS - UNDERWATER ACTIVITIES AND FINSWIMMING SECTOR**

### **DETAILED PROTOCOL FOR THE CONDUCT OF INTERNATIONAL FINSWIMMING COMPETITIONS TAKING PLACE IN ITALY**

#### **BACKGROUND**

This protocol implements, with regard to overarching issues, the provisions of the document known as: “***Guidelines pursuant to Article 1 (e) of the Decree of the President of the Council of Ministers dated 17 May 2020. Procedures for engaging in team sports training activities***”, drawn up by the Office for Sport of the Presidency of the Council of Ministers of the Italian State.

#### **SCOPE**

The purpose of this protocol is to allow the conduct of international finswimming competitions known as the “28<sup>th</sup> Senior European Championship”, “17<sup>th</sup> Junior European Championship” and “2<sup>nd</sup> Master World Championship”, making the best effort to limit as much as possible the risk of contagion from Covid-19 during such competitions.

This protocol forms an integral and substantial part of the regulations (CMAS International Regulations and Special Regulations) governing the conduct of the aforesaid competitions.

#### **CHARACTERISTICS OF VIRAL AGENT SARS-CoV-2**

Coronaviruses (CoV) are a family of respiratory viruses that cause mild to moderate severe illness. Other human coronaviruses of animal origin (zoonotic viruses) have been responsible for outbreaks of severe respiratory syndromes in the last twenty years, such as SARS (Severe Acute Respiratory Syndrome) in 2002/2003 and MERS (Middle Eastern Respiratory Syndrome) in 2012. They are defined “coronaviruses” for the crown-shaped tips that are present on their surface. Coronaviruses are common in many animal species (both domestic and wild) and can — as they are passed on to other animal species — infect humans.

In 2002, the SARS epidemic caused by SARS-CoV-1 virus broke out, followed by the MERS epidemic caused by MERS-CoV virus in 2012, both belonging to the Coronaviridae family, genus beta. In December 2019, a new zoonotic human coronavirus responsible for severe inflammatory pulmonary disease caused by SARS was identified. In the first half of February, the International Committee on Taxonomy of Viruses (ICTV) gave the new coronavirus the final name: “Severe Acute Respiratory Syndrome Coronavirus 2” (SARS-CoV-2). On 11 February 2020, the World Health Organization announced that the respiratory disease caused by the new coronavirus was named Covid-19.

## **HOW THE VIRUS IS TRANSMITTED**

The new coronavirus is a highly contagious respiratory virus that spreads mainly through contact with respiratory droplets expelled by infected people through saliva, coughing, sneezing or just talking; direct personal contact; hands, e.g. touching the mouth, nose or eyes with contaminated hands. The virus is highly contagious. In rare cases, contagion can occur through faecal contamination. Heavy droplets normally manage to cover a space of no more than one metre before falling to the ground; this is why a distance of one metre is considered sufficient to prevent transmission. However, the significance of environmental factors must be taken into account.

The displacement of air caused by an athlete and/or following an opponent closely can increase the likelihood of droplet contamination over greater distances as compared to the established measure of social distancing. In these circumstances, the stronger the wind, the greater the distance required to ensure safe conditions. Normally, respiratory diseases are not passed on with food, which, however, must be handled in accordance with good hygiene practices.

According to currently available data, symptomatic people are the most frequent cause of virus spread. The WHO considers infection with a new coronavirus to be infrequent before symptoms develop, although there are numerous observations of transmission of the infection in the two days prior to the onset of symptoms. The incubation period ranges between 2 and 12 days, 14 days being the maximum precautionary limit. The most frequent route of transmission is the respiratory route, followed by surfaces contaminated with the hands and subsequent touching of the oral, nasal mucous membranes and conjunctivae.

## **SYMPTOMS**

The most common symptoms of a coronavirus infection in humans include fever, coughing, difficulty in breathing. In the most severe cases, the infection can cause pneumonia, Acute Respiratory Distress Syndrome (ARDS), kidney failure and even death.

Common human coronaviruses usually cause mild to moderate upper respiratory tract diseases, such as the common cold, which last for a short period of time. Symptoms may include: rhinorrhoea (runny nose); migraine (headache); cough; pharyngitis (inflamed throat); fever; general feeling of discomfort; diarrhoea. Like other respiratory diseases, new coronavirus infection can cause mild symptoms such as rhinitis (cold), pharyngitis (sore throat), cough and fever, or more severe symptoms such as pneumonia, possibly involving very severe breathing difficulties.

A common symptom is anosmia (decrease/loss of the sense of smell) and ageusia (decrease/loss of the sense of taste), which seem to characterise many clinical conditions. In some cases, the infection can be fatal. The people most susceptible to severe forms include the elderly and those with pre-existing diseases. The most frequent pre-existing diseases detected in deceased persons include cardiovascular diseases, arterial hypertension, type 2 diabetes mellitus and chronic respiratory diseases, such as chronic obstructive pulmonary disease. Since the symptoms caused by the new coronavirus are non-specific and similar to those of the common cold and influenza virus, laboratory tests can be performed to confirm the diagnosis if contagion is suspected.

At present, the only test capable of establishing whether active infection has occurred, unless viral isolation by culture is relied upon, is the nasopharyngeal swab with Real Time-PCR (RT-PCR) detection of viral nucleic acid. Serological tests, according to WHO

guidance, cannot replace the molecular diagnostic swab test, but can provide epidemiological data on viral circulation in the working population.

With regard to reliance on serological tests in health surveillance for the purpose of establishing fitness, those available at present are not sufficiently valid for such purpose. For this reason, at present, there are no indications for their use for both diagnostic and prognostic purposes in occupational contexts, let alone to establish an individual worker's fitness.

## **RISK ASSESSMENT CRITERIA WITH PARTICULAR REFERENCE TO THE SPORTS ENVIRONMENT**

The criteria to be used for the assessment of the risk of transmission of the epidemiological contagion in the sports environment due to the presence of the coronavirus rest mainly on the:

- identification of the risk factors associated with the danger level of the virus;
- identification of the mechanisms of virus transmission by making reference to the scientific literature. In this connection, as an input for assessment, it is established that transmission occurs both by air and by contact;
- identification of the sources of possible contagion within the sports sites, taking into account the organisation of sites, work activities, sports activities and support for the purposes of such activities by accompanying persons;
- qualitative identification of the probability of transmission as a result of contacts between sports operators.

Following the risk assessment, a set of prevention and protection tools may be defined for risk management purposes. As a preliminary and essential stage to identify the prevention and protection measures to be adopted for the containment of the specific risk, an accurate analysis needs to be carried out in respect of the (i) activities performed on a sports facility by the staff, (ii) organisation of sports activities, and (iii) layout of a sports site.

To this end, the following steps are involved:

- analysing the organisation of sports and support activities;
- identifying sports and support activities that can be carried out through DL (Distance Learning) or remote working, the number of sports operators involved, presence of accompanying persons;
- identifying the paths for the sports operators identified as well as any accompanying persons;
- classifying sites and sports on the basis of the (i) number of people attending at the same time, (ii) type of physical activity carried out in terms of space, (iii) physical effort required of the athlete, (iv) peculiarity and ventilation of premises, time of attendance;
- analysing the layout of classified sites and sports;
- identifying the staff working outside the site, analysing paths and contacts with other people;
- establishing whether sports workers and/or operators are present at other sports sites;
- analysing the means of transport (public/private) and secondary risks;
- time schedule and review of emergency plans and procedures.

The employer/manager of the sports site/representative of the sports organisation, according to his/her own sports activity organisation plan, must — as a matter of priority — identify in-person activities to be performed:

- based on a single shift of activity/performance;
- based on several shifts of activity/performance;

- with restricted access by sports operators and/or accompanying persons;
- according to special procedures.

As part of one's own organisation, consideration must be given to the sports and support activities that can be performed remotely (through LD or remote working). Namely:

- delocalising, at least in part, the activities assigned, without the need for sports operators and/or accompanying persons to be present at all times at the sports site;
- organising the performance of sports and support activities in accordance with the goals being pursued and in an independent manner;
- relying on technological equipment suitable for the performance of sports and support activities outside the sports site;
- monitoring and evaluating the outcome of the activities assigned, in relation to the planned goals.

With regard to activities to be carried out at the sports site, the following actions need to be taken:

- considering rearranging such activities with the aim of reducing the number of sports operators (and/or accompanying persons) in attendance at the same time, i.e. consider whether it is possible to rearrange the tasks/activities so as to reduce their number consistent with any requirements set out by the specific sports discipline/sports organisation or technology, equipment and operating limits, considering the need to provide training over the very short term;
- dividing sports operators (and/or accompanying persons) — whose attendance is still deemed necessary even following any rearrangement — into groups that carry out the same activity/task at the same sites;
- establishing the risk per area in greater detail and the possible extent of the movements;
- ensuring the presence of a qualified sports coach;
- ensuring that the presence of athletes, trainees and other personnel in places where sports, motor or physical exercise activities take place is registered using a log or other solution, whether technological or otherwise;
- organising a system for the sanitisation and constant cleaning of the premises.

With respect to each sports operator, account must be taken of the most usual routes accessed within the same time bands, with particular reference to: entrance to the sports site; access to sports sites/areas; access to common areas and other places; access to changing rooms and toilets.

In the areas of specific competence, it is essential to ensure that thorough information is provided to sports site workers and all operators and, in general, to all individuals present at the sports site for various reasons, with respect to the contents of this document and the necessary arrangements made to ensure compliance with these provisions and protection of public health.

## **PREVENTION AND PROTECTION MEASURES**

Prevention and protection measures are aimed at managing the risk of contagion within a sports site. They should be adopted on the basis of the specific sports characteristics that have been identified during the risk analysis phase, bearing in mind that prevention and protection measures should not be viewed as alternatives, but as minimum requirements for the containment of contagion in relation to the current epidemiological situation.

At present, the main contagion prevention measures recommended by the health authorities include distancing, hand hygiene (including by using sanitising solution dispensers), surface hygiene and the use of masks and visors to prevent droplets from being dispersed.

On the basis of the specific results of the analysis of sports organisations and of the risk assessment carried out, the following organisational, procedural and technical measures can be identified.

Managing entrance/exit at sport sites by sport operators and other individuals

- Encouraging staggered entry/exit times to avoid as much contact as possible in common areas (entrances, changing rooms, toilets, waiting rooms, areas dedicated to sports activities, refreshment areas, etc.).

Layout and route review

- According to specific needs, a new and different internal circulation approach should be adopted;

- points of entry into and points of exit from the facility should be differentiated, if possible;

- “anti-contagion” separating barriers should be installed in areas considered as critical due to direct contact;

- athletes’ resting places (e.g. poolside) should be considered;

- anti-doping room;

- for each place involved, simulation drills should be performed regarding the routes and flows of people moving between one place and another, so as to assess any inflow and outflow gatherings as well.

Managing symptomatic cases

- An isolation area should be created where individuals showing Covid 19-related symptoms during sports activities may be temporarily gathered;

- a procedure should be developed for handling sports operators, or other individuals present on the sports site, who show symptoms attributable to Covid-19 during sports activities.

Hygiene measures and practices

- Wash one’s hands frequently;

- wear the contagion prevention equipment prescribed for each situation/sport, depending on the intensity of physical exercise and the wearability of the equipment;

- maintain the minimum interpersonal distance appropriate to the motor movement, intensity of physical exercise and other mitigation measures available;

- avoid touching one’s eyes, nose and mouth with one’s hands at all times;

- sneeze and/or cough in a handkerchief avoiding hand contact with respiratory secretions; if a handkerchief is not available, then sneeze into the elbow;

- avoid leaving clothes worn for physical activity in places shared with others. Instead, store them in backpacks or personal bags and, once back home or at the hotel, wash them separately from other clothes;

- always drink from disposable glasses or personal bottles;

- immediately discard tissues or other (well sealed) materials used into appropriate containers;

- avoid eating food in the changing rooms.

Surgical masks

To afford adequate protection, surgical masks must comply with EN 14683:2019 standards.

The application of these standards ensures that the surgical masks perform the following main functions:

- bacterial filtration efficiency: the tests set out in the standard ensure that any biological contaminants present in the sputum of the person wearing the mask (liquid particles) cannot pass through the filtering material of the mask;

- Breathability: this test is aimed at ensuring that the person wearing the mask can breathe through the fabric without too much effort. No requirements are set for the exhalation phase;

- biocompatibility: the purpose of this test is to ensure that the skin of the person wearing the mask will not experience irritative, toxic or allergenic consequences;
- cleanliness: the purpose of this test is to ensure that the material of which the mask is composed affords an adequate level of cleanliness, the mask being positioned on intact skin, close to the nose and mouth mucous membranes;
- wearability: the shape of the mask must allow it to be worn close to the nose, mouth and chin of the wearer, ensuring that the mask fits perfectly to the sides. No full adherence or face sealing properties are required.

Surgical masks will perform their protective function only if properly worn and changed frequently, typically every 4 hours or replaced when removed for eating or drinking.

## **SPECIFIC MEASURES FOR FINSWIMMING COMPETITIONS**

Considering that Finswimming takes place indoors, strict rules must be applied regarding the use of protective equipment and the utmost effort must be made to prevent situations that may frustrate compliance with an interpersonal safety distance of at least two meters. This applies to both poolside as well as other areas that are part of the facility (reception, changing rooms, etc.). Therefore, all the methods (e.g. shifts, staggered access, etc.) that allow the competitions to be held in conditions of absolute safety must be relied upon. All those who take part, in whatever capacity, in the competitions (athletes, assistants, judges, organisational staff, officials, etc.) are required to wear a mask, including inside the shuttles provided by the organiser for airport transfer services — from/to Bella Italia Sports Village. Athletes are exempted from using the mask only during the phases related to their sports performance and/or during the warm-up and preparation of their sports performance.

All participants in the competitions must, to the extent as possible, arrive at the competition site already suitably dressed for the activity they will be carrying out, so as to use the common spaces for an extremely limited period of time and thus ensure quick shifts to be taken. Taking a shower at home or back at the hotel is also highly recommended.

Participants in the competitions must comply with the following rules:

- Obligation to stay at home and/or at the hotel in the event of temperature (over 37.5°) or other flu symptoms (cough, breathing difficulties, etc.), informing the Federation physician (or club physician in club competitions) or, in his/her absence, the accompanying manager thereof;
- Obligation to promptly notify the Federation physician (club physician in club competitions) or, in his/her absence, the accompanying manager — who will in turn inform the competition physician — of the onset of any influenza symptoms after entering the sports site or during the sports performance, ensuring that an appropriate distance is kept from the people present at the competition site;
- Adoption of precautionary measures to access the sports site and, in particular, during the sports performance, such as: maintaining a safe interpersonal distance; complying with the ban on gatherings; observing the rules governing hand hygiene; using the personal protection equipment provided;
- Signing and handing over to the organiser a self-declaration (attached at the foot of this protocol) at the time of accreditation. Self-declarations may be collected and delivered to the organiser by the accompanying manager, if present.

Athletes and assistants must make sure that each use their own equipment.

Places where athletes wait their turn to compete will have to be sanitised continuously. The same applies to all the equipment or components that are likely to be used by several operators.

Secretarial and accreditation operations must be carried out by a single contact person for each country or club (in club competitions).

It is highly recommended that payments relating to participation fees be made by bank transfer at the time of registration. This will avoid the exchange of cash at the sports site.

Any equipment provided by the competition organiser must be sanitised before being distributed.

Warm-up operations, where appropriate, must take place in a staggered manner, so as to avoid the presence of such a number of people at poolside and in the water as to frustrate compliance with the interpersonal safety distance requirements. While in the water, a space of at least 7 square meters must be available for each athlete.

Star orders and rankings must be communicated using a computerised system.

Award ceremonies will be held in such a way as to prevent all medallists from appearing on the podium at the same time. As a result, awards will be presented separately and after a speaker has called in the medallists. A station equipped with disinfectant gel or liquid will be set up near the podium, with the person in charge of the award ceremony being required to use such disinfectant before and after prize-giving ceremony.

The competition schedules of the individual competitions may be revised according to the number of athletes registered.

Opening and closing ceremonies must take place in an extremely sober manner and be limited to the strictly necessary institutional aspects.

Competitions must be held behind closed doors.

***IMPORTANT: The provisions contained in this Protocol reflect the current Italian regulatory framework. Should the latter change, the Protocol will be amended accordingly.***

**SELF-DECLARATION PURSUANT TO ARTICLES 46 AND 47 OF PRESIDENTIAL  
DECREE NO. 445/2000**

I, the undersigned \_\_\_\_\_, born in \_\_\_\_\_, on \_\_\_\_\_, personal identification card No. \_\_\_\_\_, a member of the \_\_\_\_\_ Delegation, being aware that anyone making false declarations shall be punished under the Italian Criminal Code and the Italian Special Laws governing such matters (Article 46/47 of Presidential Decree 445/2000),

**hereby declare**, on my own responsibility that:

- I am not undergoing quarantine;
- At the date of signing this self-declaration, I am not showing symptoms attributable to the COVID-19 infection (temperature, cough, breathing difficulties, etc.) or other flu symptoms, and I am further aware that if this is not the case I will not be able to access the sports site unless I can produce a recovery certificate;
- To the best of my knowledge, over the past few weeks I have not had any risk-prone contact with coronavirus-infected persons and/or persons undergoing quarantine due to coronavirus.

**I undertake** to inform the Federation physician (club physician in club competitions) and, in his/her absence, the accompanying manager and to refrain from showing up at the sports site in case of:

- temperature exceeding 37.5°;
- exposure to established or probable or suspected cases of COVID-19;
- any symptoms (cough, cold, sore throat, breathing difficulties, breathlessness due to stress, tiredness and muscle pain, abdominal pain, diarrhoea, loss of the sense of taste and/or the sense of smell).

**I undertake** to comply with the appropriate measures to reduce the risk of contagion from COVID-19 as per the health and hygiene guidelines of which I am aware. In the case of an event taking place in a sports facility, I will **allow** my body temperature to be taken at each entrance of the aforementioned facility to prevent contagion from COVID-19.

**I also declare** that I have read the “Detailed protocol for the conduct of international finswimming competitions taking place in Italy” adopted by FIPSAS - Underwater Activities and Finswimming Sector.

Place and date \_\_\_\_\_

Declarant’s signature \_\_\_\_\_

Parent’s signature (if declarant is a minor) \_\_\_\_\_

*The above information will be processed in accordance with Regulation EU 2016/679 (General Data Protection Regulation) for Covid-19 prevention purposes.*

*By signing this letter, the data subject represents that he/she has read and accepts the disclosure pursuant to Articles 13 and 14 of Regulation (EU) 2016/679 as provided herebelow.*



## DISCLOSURE

***pursuant to Articles 13 and 14 of Regulation (EU) 2016/679 (hereinafter the “GDPR”)***

Dear Sir/Madam,

This is to inform you that FIPSAS, in its capacity as Data Controller, will — for the purposes and with the methods described below — process the personal data provided by you in the course of the sports activity performed at the sports site during the period of COVID-19 epidemiological emergency management.

More specifically, FIPSAS will process the following personal data:

- a) Personal details and individually identifiable information;
- b) Data relating to possible SARS-CoV-2 infection.

### **1. Purposes of processing and legal basis**

The processing of the aforesaid data is necessary for COVID-19 contagion prevention purposes, in pursuance of the “Detailed protocol for the conduct of international finswimming competitions taking place in Italy” adopted by FIPSAS - Underwater Activities and Finswimming Sector.

### **2. Processing method**

The processing of your personal data will be carried out through the operations set out in Article 4 n. 2) of the GDPR, with reliance being made also on electronic means.

### **3. Obligation to provide your personal data**

Providing your data for the purposes listed under 1 is strictly necessary for the pursuit of the purposes listed above. Should you refuse to provide your data, you will not be allowed to access the sports site.

### **4. Recipients of the data**

The personal data referred to under (a) and (b) will be processed only by FIPSAS staff and will not be disclosed to third parties unless so required by specific regulatory provisions (e.g. if a request is submitted by the Health Authority to reconstruct the chain of any “close contacts” of a participant who tested positive for COVID-19 during the event).

### **5. Transferring your data abroad**

Your data will not be transferred outside the EU.

### **6. Data retention time**

Your data will be stored for the period of time strictly necessary to pursue the purposes for which they were acquired and in accordance with the specific provisions of the applicable law and, in any case, until the end of the state of emergency.

### **7. Data Controller**

**FIPSAS**  
**Viale Tiziano, 70 – 00196 Rome**

### **8. Data subject rights**

You may at any time enquire about your personal data, be informed how they are collected, check if they accurate, complete, up to date and stored as required, and request their rectification or erasure under Articles 16 and 17 of the GDPR. Pursuant to Article 21 of the GDPR, you will have the right to object, in whole or in part, to the processing of your data for reasons related to your personal situation. These rights may be exercised by submitting a specific request — including, if you so wish, by using the form provided by the Personal Data Protection Authority, which may be downloaded at [www.garanteprivacy.it](http://www.garanteprivacy.it) — to be sent by registered letter or certified email (PEC). The data subject will also have the right to lodge a complaint with the Personal Data Protection Authority.

Date \_\_\_\_\_

Data Controller

\_\_\_\_\_