



Sports Medicine / Special Match Operations Task Force in professional football

2021-2022 season – version 1.2

Contents

Contents	2
1. Medical concept for training and special match operations.....	3
1.1 Preliminary remarks / aim / definitions	3
1.2 Basic measures	4
2. Basic principles for conducting special match operations	10
2.1 Surgical masks and/or minimum distance.....	10
2.2 Zoning in the stadium.....	10
3. Guidelines for the organisation and hygiene in the stadium.....	13
3.1 Organisational aspects in zone 1	13
3.2 Organisational and hygiene aspects in zones 1 to 3	13
4. Guidelines for team training, hotel accommodation and personal hygiene at home.....	16
4.1 Hygiene rules	16
Appendix 1: Guidelines for TV production.....	17
Appendix 2: Requirements for pooled sample testing.....	23

1. Medical concept for training and special match operations

1.1 Preliminary remarks / aim / definitions

The medical and hygiene-related concept that was developed for the Bundesliga and Bundesliga 2, the DFB-Pokal as well as the men's 3. Liga and the FLYERALARM Women's Bundesliga in order to complete the 2019-2020 season and hold the 2020-2021 season and that constituted the basis for the approval to continue match operations has been revised for the 2021-2022 season already. Additional modifications are now being added in response to the current occurrence of infection.

The goal is to adjust to the changing general conditions of the COVID-19 pandemic and the current risk assessment so that the necessary hygiene standards are maintained for everyone who is at risk on the one hand and, on the other, adequate operational safety is in place for professional football. In particular, definitions for the "vaccinated" and "recovered" statuses are being updated now to take the altered properties of the SARS-CoV-2 virus into account. The principle applies that all people who have not been vaccinated or are not regarded as recovered have to undergo regular swab testing in line with this concept.

The responsibility for implementing the measures set out below lies with the clubs as employers or respective organisers of the matches.

All the following guidelines of the medical and hygiene-related concept are based on a precise definition of the status "fully vaccinated" (including booster dose) or "recovered", as can be found in the following table:

1 st immunisation	2 nd immunisation	3 rd immunisation	Valid from	Valid until
Vaccine	Vaccine	Vaccine	+14 days	Currently no limit
Recovered	Vaccine	Vaccine	+14 days	Currently no limit
Vaccine	Recovered	Vaccine	+14 days	Currently no limit
Recovered			+ 14 Tage	Up to 90 days

Persons whose status does not match any of those listed in this table count as not vaccinated or not recovered in accordance with this concept. The vaccines are not differentiated. In other words, two further immunisations are required even after a vaccine that only requires a single dose (such as Johnson & Johnson).

1.2 Basic measures

The requirements and measures of this follow-up concept are based on the principle that people classified as having “GG status” (fully vaccinated or recovered) do not have to undergo testing. Otherwise, the established occupational health and safety rules relating to SARS-CoV-2 as well as the hygiene regulations of the relevant federal states shall apply. In contrast, tests for infection with SARS-CoV-2 and additional hygiene measures are essential for players, coaches and training staff who are not fully vaccinated or not recovered.

The following measures will be continued and are explained below:

- a. Determination of complete vaccination (“vaccinated”) or recovery from a recent infection with COVID-19 (“recovered”). This is done voluntarily based on the person’s consent and everyone is free to choose the alternative of continuing to undergo the stipulated tests;
- b. Documentation of COVID-19 infections and their progression in all the clubs encompassing the entire periphery of the teams and the referees/assistant referees (irrespective of pandemic activity);

- c. Testing of the people involved in training and competition who have not been vaccinated or have not recovered for COVID-19 infection;
- d. Logistical and organisational measures to minimise the risk of transmission at training and match venues (including rules of conduct for everyone involved);
- e. Admission of the number of spectators approved by the authorities and in accordance with protection and control measures to be defined accordingly;
- f. Reaction to developments and changes in the overall pandemic situation and to relevant legal positions and official orders.
- g. General notes

Regarding a)

The current status regarding full vaccination or previous COVID-19 infection (from end of quarantine to 90 days after diagnosis of infection) will be requested and reviewed on a regular basis during the season. The teams are free here to disclose this status or alternatively to continue to undergo the stipulated regular testing. Team doctors are responsible for ensuring that these disclosures are accurate, including that the individual status of all persons involved is correctly determined, and also for implementing the relevant differentiated measures.

Regarding b)

Data on recent cases of COVID-19 infections (date and circumstances of infection, disease management, disease progression, etc.) will continue to be collected at all Bundesliga, Bundesliga 2, men's 3. Liga, FLYERALARM Women's Bundesliga clubs and the teams additionally participating in the DFB-Pokal as well as from all potential referees and assistant referees for these categories, where anonymised data is forwarded to the DFL and DFB on the basis of the consent granted by the data subjects.

The clubs will continue to be asked to identify (not: to report) people on and around the teams who have risk factors making them vulnerable to the severe progression of a COVID-19 infection and who are not appropriately protected by vaccination. If it is not possible for these people to stay away from training and competition operations (preferred solution), they should at least be afforded special attention in all preventive measures, especially with regard to vaccinations.

Regarding c)

Infectious players, coaches and/or training staff should also continue to be prevented from coming into contact with and infecting people who are not immune during training and competitive matches. In order to pursue this objective appropriately, all people on the teams or among the referees who do not have the status “vaccinated” or “recovered” will be tested on a regular basis.

For players, coaches and training staff without “GG status”, this must be done in the form of PCR tests in accordance with § 28b of the German Infection Protection Act (IfSG) (with one test less than 48 hours before the game is expected to end) or in the form of antigen tests (third-party testing, no self-testing, permissible tests according to current list from the German Federal Institute for Drugs and Medical Devices [BfArM]) on all training, match and travel days before contact with other people. An antigen test can be avoided on match days if PCR testing is carried out 24 hours before the match is expected to end instead.

Referees who do not have GG status also must continue to undergo testing before the match. This is done by means of a PCR test less than 48 hours or in the form of an antigen test less than 24 hours before the match is expected to end. Whether referees disclose their “GG status” is left to their own discretion. If they decide not to disclose this information, they must continue to undergo the stipulated tests.

Regarding d)

The measures that are to be taken in the stadiums / at training facilities are also differentiated based on the “GG status”. This should include basically separating (potentially staggering in time) groups of people whose attendance at training and especially at competitive matches is unavoidable (e.g. separating TV production staff and players/trainers) if they have not been vaccinated or are not regarded as recovered. An abundant supply of sanitiser (two dispensers per changing room, one dispenser at the entrance to each set of showers, multiple dispensers in the area of the players’ tunnel and stadium foyer) and soap as well as disposable wipes is provided. Furthermore, physical measures will also make sense in order to enable players, trainers and referees to change and shower in compliance with the required distancing. In all of these measures, special care is necessary for people who do not have “GG status”.

Regarding e)

This concept takes into consideration the expected readmission of spectators to the matches in the Bundesliga, Bundesliga 2, men’s 3. Liga and FLYERALARM Women’s Bundesliga as well as the DFB-Pokal in accordance with separate concepts that have to be drawn up by the clubs and approved by the local authorities. Areas of activity that cannot be physically separated from spectator areas are affected by this in particular.

Regarding f)

Should further developments emerge in the course of the pandemic that make it necessary to adjust the medical and hygiene-related concept, appropriate measures can be adopted by the Sports Medicine / Special Match Operations Task Force, which will require the approval of the competent bodies of the DFL (Bundesliga and Bundesliga 2) or the DFB (men’s 3. Liga, FLYERALARM Women’s Bundesliga, DFB-Pokal) before they are implemented.

Situations of this kind may include for example an increase in the number of reinfections also in people classified as “immune” (“GG status”) or the emergence of virus variants against which the vaccine protection currently available may not be sufficiently effective. If events like this occur, it may be necessary for example to return in full or in part to the previous medical and hygiene-related concept of the special match operations during the 2019-2020 and 2020-2021.

On the other hand, an improvement in the general pandemic situation as well as a new situation in terms of regulations and official orders may also trigger adjustments to the concept.

Regarding g)

Each club appoints a medically trained hygiene officer who is responsible for ensuring that the rules mentioned in this document are complied with and for notifying all the groups affected accordingly.

This can, but does not have to be the team doctor. If possible, this person should be relieved of competing obligations while they are working on this activity; individual tasks in the area of organisation as well as individual tasks in the area of TV production may be delegated to one other person (not more than one) who has the appropriate medical expertise. A similar concept is in place at NADA for possible doping tests (information sheet for the testers).

There is no plan for the task force to actively check the measures by or to take disciplinary action in this respect. The responsibility for implementing this lies with the clubs. The request for the vaccination and “recovered” status and the regular swab testing of people who do not have “GG status” constitute the basis of the concept and have to be ensured at the clubs by the team doctors.

The legal provisions, including the German Infection Protection Act (IfSG) and health protection regulations of the federal states relating to COVID-19, especially the general

hygiene measures regulated there (such as the quality of the face masks to be used, e.g. FFP2 standard, etc.), remain unaffected.

Members of the Working Group:

Prof. Dr. med. Tim Meyer (Chair of the medical commission of DFB; Saarland University)

Prof. Dr. med. Barbara Gärtner (Specialist in microbiology and infection epidemiology, Saarland University)

Prof. Dr med. Werner Krutsch (Universitätsklinikum Regensburg, FIFA Medical Centre Regensburg, SportDocsFranken in Nuremberg)

Dr Florian Kainzinger (Think.Health Hygiene Solutions GmbH in Berlin)

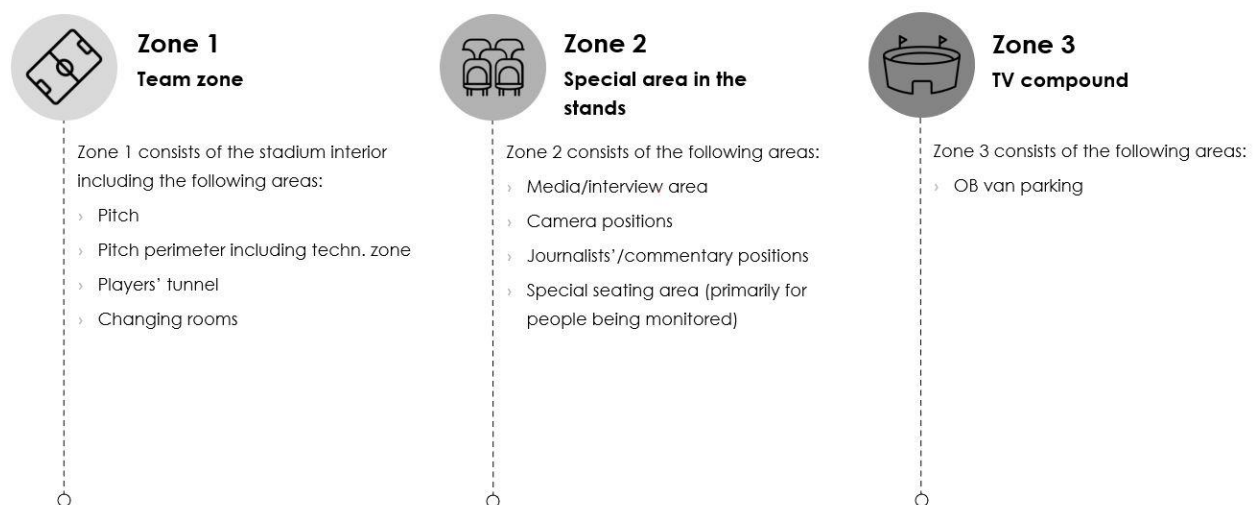
2. Basic principles for conducting special match operations

2.1 Surgical masks and/or minimum distance

In principle, all people are required to wear a surgical mask (FFP-2 where necessary, depending on the regional regulatory situation) at all times. The following exemptions apply:

- Players, coaches, training staff and referees in zone 1 (wearing a surgical masks indoors is recommended);
- All people who have been tested or vaccinated or who have recovered, provided the minimum distance of 1.50 m is maintained;
- Commentators reporting live “during the game” as long as a acrylic glass box is erected around the individual workstation;
- TV production staff in the “recreation area” (area for taking a break and recovering at the parking place for the OB vans).

2.2 Zoning in the stadium



Basics for zoning and for planning staff requirements:

- In addition to any spectator areas, three zones must continue to be set up in the stadium premises: zone 1 – “Team zone”; zone 2 – “Special stand areas”; and zone 3 – “TV compound”.
- In addition to the players, substitutes, coaches and coaching staff as well as the referees, only the people who are required in order to conduct the game operations properly and to fulfil the contractual obligations (including ball boys/girls, medics, security, refereeing team, hygiene staff, TV production in accordance with Appendix 1) are allowed in zone 1 – “Team zone”. Should physiotherapists be used for the referees and referee observers, only fully vaccinated or recovered people can be deployed.
- Zone 2 – “Special stand areas” refers to special areas in the stadium’s stands. These include:
 - Parts of the media/interview area;
 - Camera positions in the stand section;
 - Places for journalists/commentators.
- Zone 3 – “TV compound” is located within the outer boundary of the stadium (if spectators are not allowed in, zone 3 also encompasses the exterior area within the stadium’s outer boundary in addition to the parking area for the OB vans).
- Zones 1, 2 and 3 have to be separated effectively and by a large distance from all other areas of the stadium. Where possible, not only the zones, but also the access routes have to be separated from any spectator areas.

Infection control measures in the zones:

Zones 2 + 3 can be connected to each other and have to be marked off only from zone 1 and from the actual spectator areas. The following requirements apply within the 3 zones and have to be implemented in the hygiene and infection protection concept for the stadium in question, which is subject to the approval of the competent authorities:

- People who work in zones 1 to 3 because of their job and who are not regarded as recovered or who have not been vaccinated must produce proof of an up-to-date antigen test (result less than 24 hours before the match is expected to end, e.g. 5:15 p.m. for a 3:30 p.m. kick-off or 3:15 p.m. for a 1:30 p.m. kick-off) or an up-to-date PCR test (less than 48 hours before the match is expected to end). These people may then move around freely in their respective zones, but, like people with “GG status”, must wear a surgical mask when not maintaining a distance of 1.5 metres from other people.
- Proof of “GGG status” (fully vaccinated, recovered or tested negative) is checked by the organiser when issuing accreditation in the stadium.
- Unprotected contacts of people from zones 1 to 3 with the spectator areas must be avoided.

3. Guidelines for the organisation and hygiene in the stadium

3.1 Organisational aspects in zone 1

- The organisation aspects for the 2021-2022 season take into consideration the fact that a large majority of the people on the teams are expected to have full vaccine protection.
- People with “GGG status” (fully vaccinated, recovered or tested in accordance with the stipulations of this concept) do not have to observe special requirements that extend beyond the requirements for the general population either when travelling to the stadium, in the changing room area or players’ tunnel, when warming up, when the teams enter the pitch, during the game or after the game. Regardless of this, wearing a surgical mask indoors is recommended.
- When coming into contact with people outside zone 1 in the stadium, social distance has to be maintained (1.5 m) or a surgical masks (possibly FFP-2 depending on the regional regulatory situation) has to be worn.
- Mascot children are not permitted.
- The teams are allowed to enter the pitch in the normal way, e.g. line-up of the teams.

3.2 Organisational and hygiene aspects in zones 1 to 3

1. All people required in the stadium for match operations and TV production must be instructed to comply with basic hygiene measures (hand sanitising, cough and sneeze hygiene, distancing) as directed by the hygiene officer. The hygiene officer will develop a cleaning and disinfection plan to be posted as notices in all the relevant sections of the stadium. The hygiene officer or the person delegated by

the hygiene officer is to be granted the authority to directly expel an accredited employee with a pass from the stadium and to revoke their accreditation.

2. Players and employees with access to the stadium must be informed of the definition of “symptoms of infection”.
3. The entry checkpoint oversees stadium access for players, essential employees and the other people authorised to access the stadium. The person carrying out the entry check must wear a surgical mask (possibly FFP-2 depending on the regional regulatory situation).
4. As part of the entry check for special match operations, home clubs must use day passes with special marking for each of zones 1–3 for the respective match day.
5. The clubs must ensure the possibility of tracking contacts for the purpose of breaking chains of infection as early as possible (traceability).
6. A separate entrance has to be provided for players, coaches and training staff in zone 1.
7. Hand sanitiser (stands) must be provided in front of or in each room.
8. Ball boys and girls (at least 16 years old) are to wear a surgical mask (possibly FFP-2 depending on the regional regulatory situation) during their deployment if the minimum distance cannot be maintained. Parental consent must be obtained for the ball boys/girl to be assigned and the entrance checks (proof of “GGG status”) as well as the need to exclude symptomatic people must additionally be discussed with parents.
9. Personal disposable bottles used exclusively. They are collected and disposed of appropriately.
10. The regulations applicable to fitness studios must be complied with when using fitness equipment (with the exception of the entrance requirements).
11. The medical department (team doctors, physiotherapists, rehab trainers etc.) as well as other people who have frequently changing personal contacts with the

team should always wear a surgical mask (FFP-2 mask obligatory for patient and medical staff) when working. Hand sanitising and hygiene in the medical rooms must be ensured.

12. Physical separation and ample distance has to be maintained between treatment tables during treatment. Separate spaces must be used as far as possible.

13. It should generally be ensured that only people from the training staff who are essential for match play accompany the team.

14. Tests are carried out based on the minimum requirements. Details are regulated specifically for each league in the information manuals.

15. Staffing requirements

- I. Hygiene officer and their deputy
- II. Increased cleaning staff
- III. Access controller / accreditation system / security.

16. Space requirements

- I. Drug testing room and waiting room
- II. Isolation room

17. Material requirements

- I. Hand sanitiser/stands
- II. Surface disinfectant
- III. Surgical masks
- IV. Personal drink bottles
- V. Rubbish bin for waste in areas that are used

18. In all three zones, only people employed with “GGG status” at a minimum are permitted to access the stadium. The relevant proof of “GGG status” is checked at the entrance. The fixed staffing caps of the previous medical and hygiene-related concept no longer apply here. Details governing the media and TV production are presented in Appendix 1.

4. Guidelines for team training, hotel accommodation and personal hygiene at home

4.1 Hygiene rules

- In general, the regulations of the federal states governing protection against infection as well as the individually coordinated measures of the clubs with the respective local authorities apply.
- People with “GGG status” should practise adequate hygiene measures when coming into contact with other people (who are not fully vaccinated or recovered). These measures include maintaining a sufficient distance or wearing a surgical mask (possibly FFP-2 depending on the regional regulatory situation). In particular, measures of this kind must be maintained in the following situations:
 1. During arrival and departure; travel and routes outside of their own house
 2. When staying in confined spaces, common areas
 3. When staying in public spaces or at gatherings if maintaining distance is impossible
 4. When eating any meals together with other people
 5. During medical treatment
 6. On public transport
- Other hygiene measures for preventing infection for these people include regularly ventilating confined spaces, washing hands, covering the nose when sneezing and extensively avoiding physical greeting rituals.

Appendix 1: Guidelines for TV production

Objectives and general notes

1. In principle, the current regulations and guidelines of the statutory accident insurance and prevention institutions of the relevant professions that are necessary for TV production apply to TV productions.
2. Objective: standard production while protecting the employees and players at the same time. Effective separation of the media production on the one hand and players and spectators on the other has to be ensured as far as possible, e.g. through zoning.
3. It is necessary to implement basic occupational health and safety rules – distance, hygiene, surgical masks, ventilation – in accordance with the recommendations of the Bundesministerium für Arbeit und Soziales (BMAS – Federal Ministry of Labour and Social Affairs) and the Robert Koch Institute (RKI).
4. People are required to carry a surgical mask (possibly FFP-2 depending on the regional regulatory situation) with them at all times. The mask must be worn when the minimum distance cannot be maintained or it can be assumed that it cannot be maintained of one's own accord, e.g. over longer distances, in shared workplaces and indoors.

TV production in the stadium | currently zones 1 and 2

The base signal production in the Bundesliga and Bundesliga 2, including the play-offs and the Supercup, the men's 3. Liga, the FLYERALARM Women's Bundesliga and the DFB-Pokal in accordance with the camera concepts defined by contract with the media partners and in the relevant media guidelines (Bundesliga / Bundesliga 2: Appendix XI of the Licensing Regulations) should be possible:

1. It is possible to use the flat camera angles in the interior area (e.g. 16 m left, centre flat position and 16 m right, handheld camera) if the camera operator has been

- vaccinated, has recovered or has been tested negative. A surgical mask has to be worn at all times in the indoor area after the teams arrive at the stadium.
2. Compliance with the minimum distance from spectators must be ensured at all time in order to use all the camera positions in the stand section.
 3. Individual productions of additional match pictures, e.g. changing rooms that have been set up, arrival of the team bus, require separate consultations with the clubs. A surgical mask must be worn at all times during these shots.
 4. The use of a crewed handheld camera in the tunnel area, primarily when the players gather and run onto the pitch, is a regular component of the editorial run-down. The TV production service providers check alternatives that do not require camera operators, e.g. players' tunnel cam, or the feasibility of additionally increased protection requirements for the use of this camera.
 5. Shots of the line-up on the pitch are produced with a crewed camera (Steadicam and/or handheld camera). In addition to the general requirements ("GGG status", surgical mask), ample distance, at least meeting the minimum requirement, from the players has to be ensured.
 6. The hygiene concept should enable additional productions in clearly defined cases: double production, camera / production upgrades, etc.

Media work area | currently zones 2 and 3

1. The production measures in the stadium during matches in the Bundesliga and Bundesliga 2, including the play-offs and the Supercup, men's 3. Liga, FLYERALARM Women's Bundesliga and the DFB-Pokal should be possible in accordance with the production rights defined by contract with the media partners and in the media guidelines (Appendix XI of the Licensing Regulations or media guidelines issued separately for the men's 3. Liga, FLYERALARM Women's Bundesliga, DFB-Pokal).

2. Media stands:

- a. The home club, which has the authority to enforce the house rules as the organiser of the games, is responsible for issuing accreditation to journalists and photographers.
- b. The workplaces in the media stands can be planned and assigned by the clubs specifically for their stadium based on the relevant health protection regulations relating to COVID-19 that apply locally.
- c. Reporters from the audiovisual licensees who commentate live and radio reporters may commentate without a mask on during the game. It is a requirement that an acrylic glass box is erected around the individual workstation for this. Live broadcasts before the game (“commentator on air”) can also be conducted without a face mask if the commentator maintains the minimum distance.
- d. The number of photographers allowed to attend a match can be planned and their workplaces assigned by the clubs specifically for their stadium based on the relevant health protection regulations relating to COVID-19 that apply locally. Minimum distances must be maintained.

3. Press conference (pre and post-match):

Depending on the specific situation of the stadium, the press conference is held with people physically present or as a virtual press conference, which can be determined by the club. When a press conference is held with people physically present, a minimum distance of 3 m must be guaranteed between the podium and the first row of seats and every reporter must wear a surgical face mask. The room in which the press conference is held should be ventilated for at least 10 minutes every hour (better: continuous ventilation).

Unilateral production by the media partners and the DFL/DFB (e.g. interviews) | currently zones 1 and 2

1. The production measures in the stadium during matches in the Bundesliga and Bundesliga 2, including the play-offs and the Supercup, men's 3. Liga, FLYERALARM Women's Bundesliga and the DFB-Pokal should be possible in accordance with the production rights defined by contract with the media partners and in the media guidelines (Appendix XI of the Licensing Regulations or media guidelines issued separately for the men's 3. Liga, FLYERALARM Women's Bundesliga, DFB-Pokal).
2. Interview positions can be set up on the periphery of the stadium interior if minimum distances are maintained. Furthermore, the lower stand section can be used if spectators are not allowed there. In principle, all interviews should take place outdoors as a priority. As soon as the weather, for example, prevents outdoor interview positions from being set up, interview positions in the indoor area (flash zone) can additionally be set up.
3. As soon as the indoor area is opened in principle, it can be examined for the specific stadium basis whether the mixed zone can also be opened, but only, however, if the minimum distance is maintained and subject to the requirement to wear a surgical mask.
4. In addition to maintaining the minimum distance, a surgical mask has to be provided for the interviewer and the other production staff during all interviews in the indoor area.
5. In stadiums with large pitch-view studio rooms, shows can again be broadcast from the TV studio provided the local regulatory situation is complied with.
6. Hosts / on-pitch reporters of the licensees who are on air do not have to wear a face mask in the period when they are making on-location comments, when hosting more extensive broadcasts for example for top Bundesliga matches or

when conducting interviews if the minimum distance is maintained. Otherwise, a surgical mask has to be worn at all times.

7. National and international licensees as well as DFL Digital Sports for the DFL may use cameras behind the goal in accordance with their production rights (e.g. ENG teams and services provided by the client).

TV compound and OB vans | currently zone 3

1. The number of workplaces in the OB vans is reduced in accordance with the space concept (distances, partition walls) to the minimum operationally necessary for ensuring the contractual production and camera standards.
2. Confined spaces should be ventilated for 10 minutes every hour, ideally productions should be carried out with doors open.
3. Equipment surfaces and door handles must be cleaned by the service provider using a surface disinfectant before the production starts and after setup on the day of the production.
4. It is a requirement to wear a surgical mask (FFP-2 where necessary, depending on the regional regulatory situation) at all times when entering the OB van.

Tasks of the club, entrance checks and basic hygiene regulations

1. As a result of the “GGG regulation” for people working in media production, the entrance check conducted by the clubs plays a key role in the return to regular media production conditions, some of which are stipulated in contracts.
2. The club’s hygiene officer and their deputy are to be retained primarily for medical, health-related and organisational issues and interface activities between the club and the media production providers.
3. The club’s hygiene officer or their deputy shall work closely together with the production manager (PM).

4. All hygiene specifications for the media production (e.g. equipping of workstations, minimum distances, etc.) must be complied with in accordance with official requirements.

Appendix 2: Requirements for pooled sample testing

- Dual-target PCR
- validated in accordance with the Guidelines of the German Medical Association and/or accreditation
- analysed by a specialist
- original sample probe for resolving the pool is available (possibly two swabs)