

Pembina Minor Hockey Association (PMHA) has put together this document to bring awareness to some new procedures for the 2020/2021 season. These procedures are put into place to comply with Alberta Health Services, Hockey Alberta and Hockey Canada Guidelines relating to COVID-19.

Pembina Minor Hockey Association (PMHA) COVID-19 Guidelines as of September 23, 2020.

Please ensure to read all parts of this document along with the documents listed below with your child as they will be expected to adhere to these procedures. A link to the following documents can be found on the PMHA website. Please be aware that these documents are changing on a regular basis and PMHA will keep you updated with the necessary information.

Updated Return to Hockey – Hockey Alberta

COVID -19 Alberta Health Daily Checklist

Pembina Rec-Plex COVID Information

Screening/Contact Tracing/Safety Precautions

PMHA must track all participants and their interactions on a daily basis. This information must be maintained to assist Alberta Health Services should an individual test positive for COVID-19 and contact tracing is necessary. As a result, rosters are to be kept for each event/activity so there is a record of which individuals were present.

Individuals are not permitted to participate in any activity or program if they answer yes to any of the questions on the Covid-19 Alberta Health Daily Checklist. These questions are to be assessed prior to any event.

Should an individual answer yes to any of the questions on the following page or become ill during a practice, they will be expected to follow the Return to Hockey Procedures outlined in section 7 of the Hockey Canada Safety Guidelines.

PMHA will be utilizing an app that allows us to take attendance. Instructions on using this app will be sent out as soon as it is available. Once this app is available, each participant including coaches will be **required** to log in and record attendance and do a self assessment that will clear the player to participate and document their attendance at the event.

Please bring a signed copy of this document and hand it to the Game & Conduct/Safety Executive or scan and send back to nickboser13@gmail.com. This needs to be done **BEFORE** any participants step onto the ice.

COVID-19 INFORMATION

Screening Questionnaire

COVID-19 ALBERTA HEALTH DAILY CHECKLIST

PARENTS/GUARDIANS/STUDENTS MUST USE THIS QUESTIONNAIRE DAILY TO DECIDE IF THE STUDENT SHOULD ATTEND SCHOOL.

The tool is meant to be used to assist with assessing attendees who may be symptomatic, or who may have been exposed to someone who is ill or has confirmed COVID-19.

Attendees should fill out this checklist prior entering school daily. If an individual answers YES to any of the questions, they must not be allowed to attend school. Children and youth will need a parent to assist them to complete this screening tool.

As the COVID-19 pandemic continues to evolve, this screening tool will be updated as required.

Screening Questions

		CIRCLE ONE	
1.	Does the attendee have any new onset (or worsening) of any of the following	YES	NO
	• Fever	YES	NO
	• Cough	YES	NO
	• Shortness of Breath / Difficulty Breathing	YES	NO
	• Sore throat	YES	NO
	• Chills	YES	NO
	• Painful swallowing	YES	NO
	• Runny Nose / Nasal Congestion	YES	NO
	• Feeling unwell / Fatigued	YES	NO
	• Nausea / Vomiting / Diarrhea	YES	NO
	• Unexplained loss of appetite	YES	NO
	• Loss of sense of taste or smell	YES	NO
	• Muscle/ Joint aches	YES	NO
	• Headache	YES	NO
	• Conjunctivitis (Pink Eye)	YES	NO
2.	Has the attendee travelled outside of Canada in the last 14 days?	YES	NO
3.	Has the attendee had close contact* with a confirmed case of COVID-19 in the last 14 days?	YES	NO
4.	Has the attendee had close contact with a symptomatic** close contact of a confirmed case of COVID-19 in the last 14 days?	YES	NO

* Face-to-face contact within 2 metres. A health care worker in a occupational setting wearing the recommended personal protective equipment is not considered to be a close contact.

** 'ill/symptomatic' means someone with COVID-19 symptoms on the list above



THE PARENT/GUARDIAN OF THE NAME CHILD, HEREBY UNDERSTAND THE ADDITIONAL PROCEDURES AND POLICIES THAT ARE IN PLACE FOR THE 2020/2021 HOCKEY SEASON AND AGREE TO FOLLOW THE SAID PROCEDURES.

SKATER _____

SIGNATURE _____

(signature from Guardian if skater is under 18)

DATE _____