



**International
Handball
Federation**



COVID-19 Medical Precaution Plan Egypt 2021

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1. Introduction

1.1. Mission

Handball is a fast and dynamic team sport, which requires strength and endurance from its athletes. In contrast to other sports, body contact is a part of handball and cannot be avoided as the players try to break through the defence to score goals. As handball is physically very demanding, the athletes playing it must be healthy and the health of the athletes is a top priority of the International Handball Federation (IHF).

As the IHF's main objective is to organise the 27th IHF Men's World Championship in a healthy and safe environment for all parties involved, the present COVID-19 Medical Precaution Plan has been elaborated which defines medical and operational protocols to safeguard players, coaches, team officials, referees, match officials and other stakeholders during the World Championship in Egypt. The main aim of the preventive measures is to try to reduce the risk of transmission of COVID-19 before, during and after the World Championship. While the COVID-19 situation is constantly evolving and an infection-free environment cannot be guaranteed, the IHF's goal is to ensure the implementation of the utmost medical precautions for the protection of all stakeholders involved in the World Championship, and to provide high standard medical services in the event of any suspected or confirmed case of COVID-19.

All costs arising from the implementation of the present COVID-19 Medical Precaution Plan will be covered by the Organising Committee.

In addition to the COVID-19 Medical Precaution Plan, the IHF is elaborating COVID-19 Competition-Related Guidelines for Egypt 2021.

1.2. General event-related information

The International Handball Federation will hold the 27th Men's World Championship in Egypt from 13 to 31 January 2021. For the first time 32 participating teams from around the world will be competing for the medals. The following teams are taking part, taking into consideration that one team from North America and the Caribbean and one team from South and Central America have yet to qualify:

Hosts: Egypt (EGY)

Reigning world champions: Denmark (DEN)

Africa: Algeria (ALG), Angola (ANG), Cape Verde (CPV), DR Congo (COD), Morocco (MAR), Tunisia (TUN)

Asia: Bahrain (BRN), Japan (JPN), Qatar (QAT), Republic of Korea (KOR)

Europe: Austria (AUT), Belarus (BLR), Croatia (CRO), Czech Republic (CZE), France (FRA), Germany (GER), Hungary (HUN), Iceland (ISL), Norway (NOR), Portugal (POR), Spain (ESP), Slovenia (SLO), Sweden (SWE)

South and Central America: Argentina (ARG), Brazil (BRA), Uruguay (URU)

Wild cards: Poland (POL), Russia (RUS)

The 27th Men's World Championship, which is the fifth IHF Men's World Championship taking place outside Europe, will be played in four venues in Alexandria, Cairo, Giza and the New Capital:

- Alexandria: Handball Hall Borg Al Arab (capacity: 5,000 spectators)
- Cairo: Cairo Stadium Indoor Halls Complex (capacity: 17,000 spectators)
- Giza: Handball Hall 6th of October (capacity: 5,200 spectators)
- New Capital: Handball Hall (capacity: 7,500 spectators)

The 32 teams are divided into eight groups of four teams. Each venue hosts two groups of the preliminary round, which is played from 13 to 19 January. The top three teams of their respective preliminary round groups move on to the main round (20-25 January), while the teams ranked last in their preliminary round groups play the President's Cup. The 24 main round teams are divided into four groups of six teams each. The top two teams of the main round groups advance to the knock-out stage, which starts with the quarter-finals on 27 January, then continues with the semi-finals on 29 January. On the final day, 31 January, the match for third place and the gold-medal match are played.



2. General information about COVID-19

2.1. Symptoms

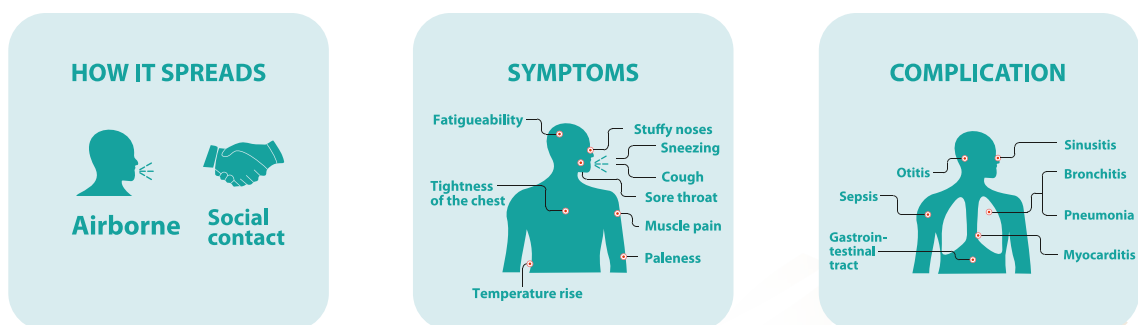
According to the World Health Organization (WHO), COVID-19 is the infectious disease caused by the most recently discovered coronavirus. The symptoms of COVID-19 include but are not limited to fever equal or higher than 38°C, cough, loss of smell and/or taste, difficulty in breathing and general weakness.

After being infected, a person is developing symptoms on average within 5 to 6 days, considering that it might take up to 14 days. Most infected people will either have mild or moderate flu-like symptoms while others will have a severe manifestation form of the disease requiring hospitalisation and even intensive care unit admission. Some infected people are asymptomatic while being carriers of the disease and infectious to others.

2.2. Infection transmission routes

COVID-19 mainly spreads between people through direct or close contact with infected people through infectious droplets from their mouth or nose during coughing or sneezing or extensive conversations for more than 15 minutes.

Indirect contact may also lead to the spread of the virus through touching contaminated objects or surfaces such as tables, doorknobs and handrails before touching the mouth, nose or eyes. Furthermore, ventilation could be considered as a risk factor for airborne transmission.



2.3. Hygiene guidelines

In general, physical distancing is considered the most effective way to reduce the risk of transmitting the virus.

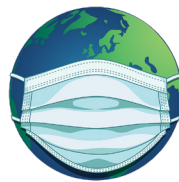
Therefore, all stakeholders involved in the World Championship must keep **physical distancing of at least 1.5m** to other persons, where possible. Contact with any person having symptoms of respiratory illness such as coughing, sneezing or fever must be avoided.

Furthermore, all stakeholders involved in the World Championship must respect the following **hand hygiene** guidelines:

- Washing hands using soap and water for at least 20 seconds is essential.
- Dry your hands using paper towels and dispose of them afterwards.
- In case soap and water are not available, use hand disinfectant.
- Avoid touching the water tap before and after washing your hands, use paper towels to open and close the tap and then dispose of them.
- Avoid touching eyes/nose/mouth with your hands.

In addition to the hand hygiene guidelines, compliance with the rules of personal hygiene and especially good respiratory hygiene practices (cough etiquette) is of utmost importance.

Moreover, all stakeholders involved in the World Championship must wear **face masks (surgical or medical masks)** in all closed premises (accommodation, training halls and arenas, means of transportation, etc.) at all times, except for players, team officials and referees during matches or trainings. Everyone should ensure using and wearing a mask or respirator properly and consistently, according to its purpose as described in the instructions. Used and contaminated masks or respirators should be properly removed to prevent the spread of viruses to the hands, face and other contact surfaces. Only the straps but not the surface of the mask or respirator should be touched when removing it. Washing hands after disposal of a used mask or respirator is strongly recommended. The amount of talking when wearing a mask or respirator should be reduced in order to lower the amount of condensation produced within the mask or respirator and thus extend its effective life. To be effective, masks or respirators should be changed if soiled or wet. As masks or respirators are contaminated once used, they should not be reused.



In addition, the Medical Commission will ensure that all surfaces throughout the premises are periodically cleaned and disinfected. Using disposable eating and drinking equipment is strongly recommended.

Posters of COVID-19 precautionary measures will be displayed at the dedicated places in the arenas, accommodation places and transportation in order to inform about the spread, symptoms and prevention of the virus and raise the stakeholders' awareness on the importance of hand hygiene, following respiratory etiquette, wearing face masks and maintaining physical distancing of at least 1.5m.

People who have symptoms indicative of COVID-19 or belong to vulnerable (COVID-19) groups should not travel or participate in any handball activity before or during the event.

3. Considerations and recommendations before the event

3.1. Risk assessment

The Medical Commission will establish continuous monitoring and risk evaluation of the COVID-19 transmission level in all participating teams' countries starting one month before the World Championship. If the COVID-19 transmission risk in the home countries of the teams is considered medium or high, the prevention measures for the delegations concerned will be enhanced.

3.2. Training camps in the home country

The following is recommended for training camps being held in the home countries of the participating teams:

Each National Federation should establish a Task Force Committee to assess the appropriate time to start training safely and be in constant contact with the Medical Commission in compliance with WHO recommendations and national and local requirements/legislations. In addition, each team shall hire a medically trained hygiene officer responsible for the compliance with these recommendations as well as with the protective measures as advised by the World Health Organization and other health authorities.

All players should be systematically examined (pre-competition medical assessment, blood picture, electrocardiogram (ECG), echocardiogram, chest X-ray) while the markers of myocardial damage shall be determined (troponin and B-type natriuretic peptide). A close medical observation of the players shall be conducted by using a questionnaire focusing on the symptoms indicative of COVID-19, but also on the symptoms of cardiac damage. The examination results shall be communicated to the IHF and the Medical Commission. The same shall apply for referees in case of friendly matches.

Before regular team training, at least one COVID-19 PCR (Polymerase chain reaction) test is required of everyone involved in training operations – preferably within 5 days (inclusive) of the day before training starts. Only persons tested negative will be allowed to participate in handball activities. Each National Federation shall regularly report its entire training plan, testing procedures, and test results to the IHF and the Medical Commission.

As an additional safety measure, if possible, at least seven days prior to the start of the training camp will be spent in quarantine, where regular testing and recording of body temperature will be continued. During the ongoing training camp, PCR testing once a week is considered appropriate.

Utmost hygiene standards as set out in chapter 2.3. should be maintained throughout the arena while hand disinfectants as well as face masks should be available throughout the arena.

In terms of transportation, it is recommended to use multiple buses/vans (keeping a minimum distance of 1.5m) that have been adequately disinfected before entering and to wear face masks during the travel. Individual arrival of players by car should be considered (avoiding carpooling).

The following is recommended for friendly matches:

The arrival of both teams at the arena should not overlap in time or space. In general, it is strongly advised to arrive as closely as possible to when the team needs to be at the arena.

Every player should bring a full water bottle to avoid touching a tap or water fountain handle.

Adjacent free spaces may be used as additional changing rooms for the teams, if applicable, considering that a minimum distance of 1.5m should be kept. Alternatively, larger rooms may be used as changing rooms. The time spent in changing rooms should be restricted to the minimum necessary (approx. 30-40 minutes for individual players). Proper ventilation of changing rooms should be applied.

When entering and leaving the court, players must comply with the minimum distancing rule (during warm-up, playing time, half-time, and after the match). Wider entry zones to the court should be considered.

In order to respect the distancing rule, child escorts and assemblies (e.g. team photos, handshakes) should be avoided while the team benches should be expanded. The number of people in the arena should be limited according to current government guidelines.



4. COVID-19 officers and medical facilities

The following COVID-19 officers and medical staff shall be appointed by the Medical Commission:

- Event chief medical officer
- IHF COVID-19 officers (one per IHF hotel)
- Teams' COVID-19 officers (one per participating team)
- Arena medical teams (each team consisting of four persons)
- Hotel medical teams (each team consisting of four persons)

The following medical facilities will be available throughout the World Championship:

- Arena medical aid points
- Hotel medical aid points
- Five COVID-19 isolation rooms at hotels
- COVID-19 referral hospitals
- Main referral hospital: Wadi El-Neel
- Ambulance services
- Laboratories




PPE (personal protective equipment) will be made available for all event participants.



5. COVID-19 testing policy

5.1. General provisions

Upon arrival to Egypt, every person entering the country is required to provide a negative COVID-19 PCR test carried out within 72 hours before the arrival date. Please refer to the following sample certificate:

 الإدارة المركزية للمعامل وفروعها Central Public Health Laboratories & Branches		 جمهورية مصر العربية Arab Republic of Egypt		 وزارة الصحة والسكان Ministry of Health and Population	
شهادة تحليل مسافر Passenger Test Certificate					
E.NO. *****					
الاسم Full Name				الرقم القومي ID Number	
جواز السفر Passport Number				مركز الفحص Examination Center	
تاريخ الفحص Examination Date				CPHL - الإدارة المركزية للمعامل	
نتيجة الفحص Examination Result					
الفحص Test		نتيجة Result			
PCR Covid-19		Negative			
Signature					
Please review the travel requirements for each country in terms of infection status , as a positive analysis may be a reason for preventing you from traveling according to regulations of some countries .					
يرجى مراجعة متطلبات السفر الخاصة بكل دولة من حيث وضع الإصابة حيث أن ايجابية التحليل (Positive) قد تكون سببا في منعك من السفر طبقا للوائح بعض الدول .					
www.mohp.gov.eg					

On the arrival day, every stakeholder involved in the World Championship shall perform a PCR test at the hotel. Afterwards, all stakeholders belonging to the bubble (please refer to chapter 6) shall repeat the PCR test within every 72 hours.

All stakeholders are tested on the same day according to their working schedule. The test results are available within two hours.

Any positive case shall be confirmed by a second laboratory.

5.2. Isolation of suspected or confirmed cases

Any stakeholder involved in the World Championship who develops any respiratory or flu-like symptoms (e.g. fever equal or higher than 38°C, cough or difficulty in breathing) must leave the arena immediately (if applicable), be isolated in the COVID-19 isolation room at the hotel, be tested and inform the team doctor and the team's COVID-19 officer (in case of any team member) or the IHF COVID-19 officer (in case of any other stakeholder). The responsible COVID-19 officer will report the suspected case to the event chief medical officer who will report to the respective health authorities and the Medical Commission accordingly.

Any stakeholder involved in the World Championship who was in direct contact with a confirmed COVID-19 case should be tested accordingly and be isolated until the test result is issued.

In case of confirmed cases, the stakeholder concerned may return to the group as soon as a negative test result has been issued. After the confirmation of a positive result, it may take up to 10 days until a negative result is issued.

In case of confirmed cases and contacts of confirmed cases, further tests will be carried out in terms of serology, CBC, CRP and radiology (chest X-ray and CT).

6. Bubble concept

A bubble concept is applied with the aim of minimising the transmission of COVID-19 infections before, during and after the World Championship in Egypt. All the stakeholders involved in the World Championship should enter the bubble without any external contact between one and three days before and throughout the event.

These stakeholders include but are not limited to:

- Participating teams – players and officials
- IHF nominees (representatives, referees, technical delegates, event delegates, IHF office staff, IHF Media group etc.)
- Organising Committee
- Drivers
- Press, photographers and media (local and IHF)
- TV production crew
- Marketing representatives and board manufacturers
- COVID-19 officers for each category of stakeholder
- Team Guides
- Volunteers
- Hotel staff
- Catering staff and waiters
- Cleaners
- Doctors, medical staff, Doping Control Officers, chaperones
- Training halls' and arenas' staff
- Other support staff (speakers, statistics, etc.)



7. Precautions for transportation

7.1. International travel procedures

International travel usually refers to airline flights.

It is imperative to be in compliance with chapter 2.3., throughout the international travel. Every stakeholder involved in the World Championship must comply with the applicable instructions of the airlines. Temperature screening should be carried out at the departure airport as well as at the arrival airport.

As mentioned in chapter 5.1., Egypt will require any person entering the country to provide a negative COVID-19 PCR test carried out within 72 hours before the arrival date.

7.2. Local travel procedures

Local travel refers to bus, van, and car for the transportation of stakeholders between airport and hotel, and hotel, arena and training hall.

Each category of stakeholder should have its own dedicated vehicle for the duration of stay and event.

The drivers and passengers should always wear a face mask and respect all hygiene guidelines as per chapter 2.3. Moreover, the drivers must also wear gloves.

For bigger vehicles such as buses, the drivers and stakeholders must maintain a distance of 1.5m at all times (chessboard seating arrangement). If the buses have entrances in the centre or rear, these doors should be used, so that passengers can enter and exit, and keep sufficient distance to the driver.

Every stakeholder must go through body temperature screening before boarding. Persons who develop fever or symptoms indicative of COVID-19 are not allowed to enter the bus. All vehicles should be thoroughly cleaned and disinfected before and after every trip during the World Championship.



8. Precautions for accommodation

It is reminded that every stakeholder follow the guidelines set out in chapter 2.3.
The following precautions for accommodation should apply:

- Temperature screening at the entrance of the hotel.
- Hand disinfectants should be widely available throughout the hotel, including the meeting rooms and dining rooms. These rooms should be large enough to ensure physical distancing.
- Buffet will be provided (no self-service).
- No clean-up of tables should be undertaken until all stakeholders have left the dining room, so that the smallest number of hotel staff is present in the dining room during meals.
- Towels, linens and bath robes are replaced daily.
- Sauna and steam rooms are restricted.
- In case of symptoms indicative of COVID-19, the responsible COVID-19 officer must be informed immediately and the stakeholder concerned must be isolated in the isolation room.
- Cleaning and disinfection of rooms on a regular basis.
- Disinfection of the swimming pool and gym facilities after each use.
- Disinfection of luggage (arrival and departure).
- Stakeholders should use toilets and showers in their own room and not share them with other persons.

9. Precautions for training halls and arenas

9.1. General provisions

Any stakeholder having any symptoms indicative of COVID-19 as described in chapter 2.1. is not allowed to enter the training hall and arena. Players, team officials, referees, technical delegates (scorekeeper and timekeeper) and other stakeholders involved directly in the match who develop symptoms must leave the training hall and arena immediately, be isolated in the isolation room, be tested and inform the team doctor and the team's COVID-19 officer (in case of any team member) or the IHF COVID-19 officer (in case of any other stakeholder). Any persons who were in direct contact with a confirmed COVID-19 case should be tested accordingly and be isolated until the test result is issued.

All shops and food booths in the arena must follow the physical distancing measures and for all queues at the arena entrance and shops, physical distancing must be ensured.

No meals will be served in the VIP area of the arena. Packed meals are available for IHF nominees in their designated room in the arena. Packed snacks for the teams are available in the bus.

Training halls are disinfected before and after each training session while the arenas, including any marketing materials, are disinfected before and after each match day.

9.2. Entrance and exit regulations

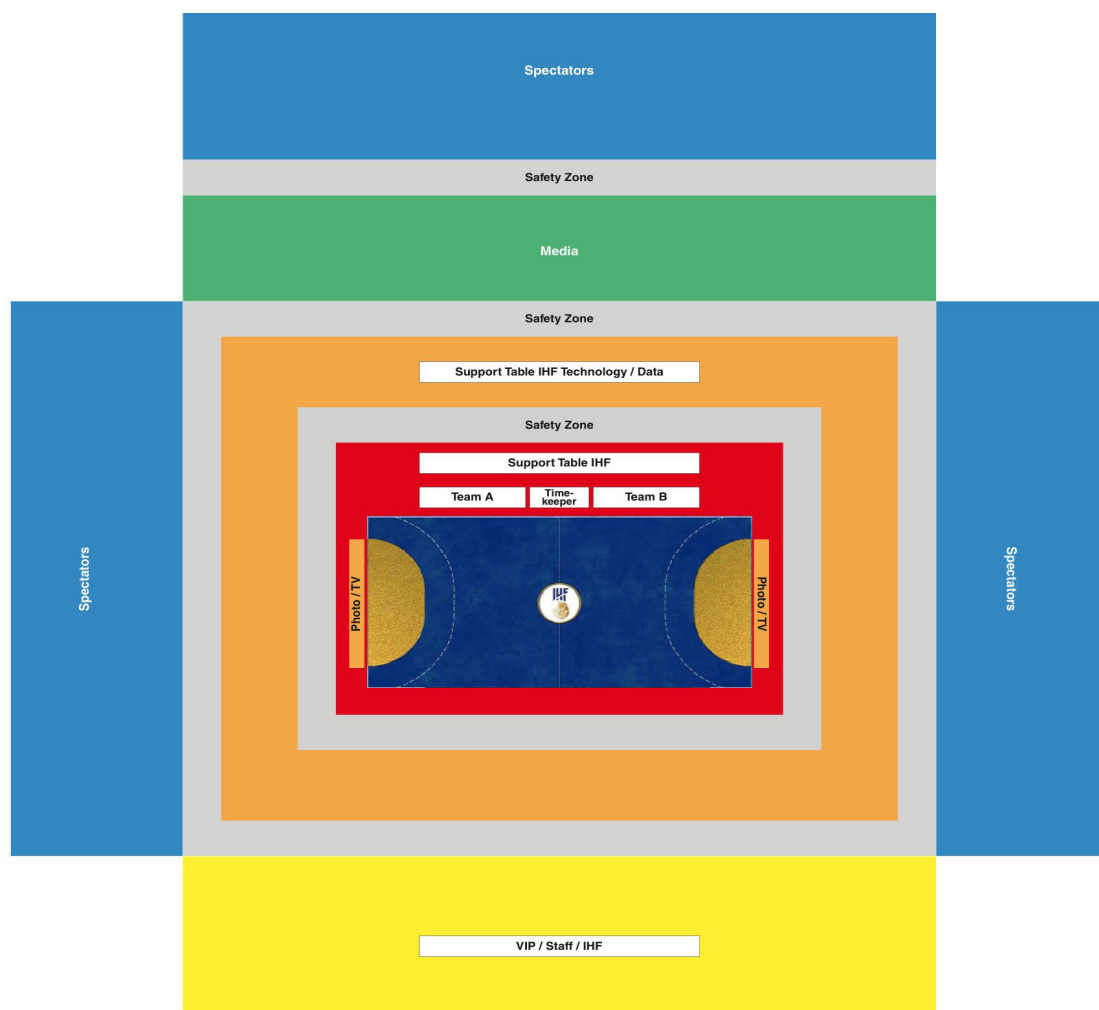
To avoid crowding at the entrance and exit of arena, the arrival schedule of stakeholders should be fixed. It is advised to have a one-way entrance and exit for every stakeholder.

A temperature screening procedure should be implemented at the entrance of the arena and training hall. Security staff and temperature screening staff are obliged to wear masks and gloves, and use hand disinfectants at the entrance and exit area.

9.3. Zones

The arena shall have five different zones, with each zone specially designated for each category of stakeholder attending the match. Switching the zones shall not be allowed.

The Medical Commission will define the maximum number of persons allowed to be within each zone at the same time, depending on the development of the pandemic as well as the size, space and circulation of the area. The hygiene guidelines as set out in chapter 2.3. must be respected at all times.



Zone	Sector	Group
Red	Field of play area Playing field, match management table, Team benches, IHF Support Table with selected personnel Changing rooms, team dedicated rooms such as toilets, doping control rooms, medical rooms IHF referee and nominees dedicated areas such as referee changing rooms	National teams including officials listed in official match report Referees Match officials (match management table / IHF and local) Moppers IHF Doping Control IHF Event Delegate Floor manager Ball kids
Orange	FOP surrounding Behind goal Support Table Technology and Scouting (speaker, scouter etc.)	Photographers Medical services TV production/cameras Security IHF Marketing personnel Hall entertainer/announcer Match stats/data
Yellow	Stands, separate offices/ meeting rooms/outside area (TV/security)	Team delegations TV production Fire service Police/security
Green	Stands	Media Media manager
Blue	Stands	Spectators (where allowed) Security

9.4. Changing rooms

Teams and referees have their own changing rooms, medical treatment rooms and toilets. The changing room should be large enough to allow for sufficient space between each player to ensure physical distancing is respected. Time spent in changing rooms must be restricted to the minimum necessary (approx. 30-40 min. for individual players). Players are recommended to put on the players' uniform at the hotel before going to the arena or training hall. Players should take a shower at their hotel rooms, if possible.

Teams must bring their own, towels and personal items. Eating in the changing room is not allowed.

The staff at the training halls and arenas should ensure that the changing rooms, medical treatment rooms and toilets are thoroughly cleaned and disinfected after each training session and after each match. The door knobs, chairs, tables and floors must be cleaned and disinfected regularly.

Changing rooms need to be ventilated regularly, and need to have waste bins with lid.

10. Precautions for matches

10.1. General precautions

All stakeholders in the arena must be fully briefed on COVID-19 measures and always follow the hygiene guidelines (please refer to chapter 2.3.). All zones in the arena must be thoroughly cleaned. Hand disinfectants must be available in every zone (please refer to chapter 9.3.).

When entering and leaving the court, players must comply with the minimum distancing rule (during warm-up, playing time, half-time, and after the match).

10.2. Precautions before the match

Handshaking between the two teams, referees, timekeeper and scorekeeper during the pre-match procedure is prohibited. Child escorts and assemblies (e.g. team photos, opening ceremony with extra VIPs) are not allowed.

10.3. Precautions during the match

During the match, the mask must be worn by everyone, except the players, team officials and referees on the field of play. The players must avoid touching their face after handling a ball or other equipment. On the team bench, sanitising solutions should be available for the players and team officials. Team benches should be expanded to respect the distancing rule. Sharing foods, drinks or towels must be avoided.



10.4. Precautions after the match

Players and team officials must leave the field of play immediately after the end of the match (staggered departure or two different exits, if possible). They must wash hands with soap and water for at least 20 seconds or use hand disinfectant before leaving the arena (see chapter 2.3.). Players are recommended to take a shower in their hotel room after returning from the arena. In case of award ceremonies, every team shall be honoured separately (once a team is honoured, the players are leaving the field of play), shaking hands between the Organising Committee and the winners is prohibited, and the winners shall receive their medals to be put on by themselves. All stakeholders involved in award ceremonies, except players, are obliged to wear face masks while physical distance shall be maintained.

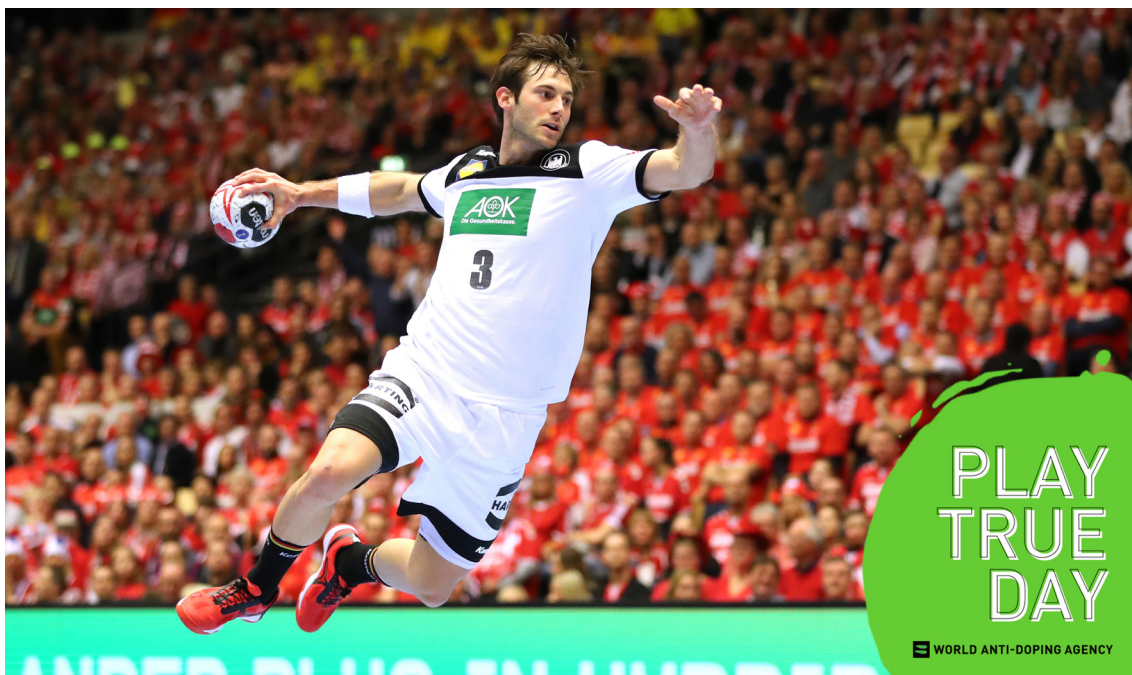
Venue staff should start cleaning the arena after the teams leave the field of play.

11. Doping controls

Hygiene and mask guidelines should be respected in the doping control room at all times.

The room must be fully clean and disinfected. It should be large enough to allow players and doping control officers (DCOs) to respect the physical distancing. Where possible, a second room for doping tests shall be set up to physically separate players on both teams.

The DCOs are required to wear gloves to proceed the sample collection from the players. These DCOs must have a negative COVID-19 test result 72 hours before entering the arena and doping control room.



12. Precautions for the media

12.1. General principles

Everyone involved in the event on-site, including, but not limited to, all companies and their staff members, must comply with the applicable local and national law as well as the requirements of the present COVID-19 Medical Precaution Plan. These include regular PCR tests within every 72 hours, a mandatory wearing of masks, keeping a safe distance and regular washing of hands.

Moreover, the broadcasters must meet all local and national requirements during their work, such as the use of plexiglass dividers between operator positions.

Everyone operating in the arena, including, but not limited to, companies and their staff members, will be informed about all requirements and restrictions in place in advance. The venue's medical team must guarantee that all regulations are respected.

In general, the number of media representatives and broadcasting staff members will be kept at a minimum depending on the capacity of the arena.

Medical services for media representatives will be provided in the arenas.



12.2. Staff, facilities and positions for broadcasters and photographers

12.2.1. On-site staff members

The number of on-site staff members depends on:

- The applicable local law;
- The working spaces available with appropriate hygiene measures;
- The total number of people permitted in the Zones as defined in chapter 9.3. as well as any limitation on the number allowed in the arena under local or national law.

12.2.2. Broadcast compound and trucks

The compound must be arranged in a way that allows sufficient space for people to move, i.e. it must not be crowded. For example: vehicles appropriately spaced apart, creating additional routes or paths to limit any crowding of people.

12.2.3. Media tribune

The distribution of media in the stands must guarantee that a 1.5m distance can be maintained.

During their work, commentators are temporarily exempt from the requirement to wear a mask, but must still wear one at all other times.

12.2.4. Media room

A physical distance of 1.5m must be respected in any media room at all times. Media rooms need to be ventilated regularly.

12.2.5. Broadcast positions during match

TV production is only allowed in the Yellow and Orange Zones (see chapter 9.3.).

TV personnel operating in the Orange Zone must ensure that they always keep at least a 1.5m distance from all players and officials, except where it is unavoidable and accidental during a match.

12.2.6. Photographers during match

The number of photographers during a match will be limited to 16, i.e. four behind each side of the goal, to guarantee a safe distance between each photographer.

The position of each photographer must be clearly marked.

12.3. Media activities

12.3.1. Media activities during training

No regular media activities during training shall be allowed.

12.3.2. Filming team arrivals

In order to film team arrivals, one manned camera position is allowed, with the position to be fixed beforehand upon agreement of the IHF. The position must guarantee a distance of at least 1.5m from player and team staff paths.

If a suitable position cannot be found, a remote camera solution may be used if the IHF approves.



12.3.3. Pre-match interviews

Positions to do pre-match interviews must be allocated beforehand, with a distance of at least 1.5m between each position. The maximum number of positions depends on the arena.

The maximum number of people, including the interview guest, is limited to four per interview.

12.3.4. Press conferences

All press conferences shall be held virtually. Only the coach and one player of each team in addition to one moderator are allowed to attend such virtual press conference.



12.3.5. Flash Zone

Flash Zone interviews are allowed, provided the allocated area allows for 3m² per person. The reporter and camera crew must stay at least 1.5m from the player at all times.

All arrangements must be discussed and agreed upon beforehand between the Host Broadcaster, the team representative and the IHF.

12.3.6. Mixed Zone

Mixed Zones must not be organised in order to avoid crowded areas and reduce close proximity between teams and media.

12.3.7. Changing room filming

Reporters and broadcasters, including the host broadcaster, will not be allowed to enter team changing rooms for filming. Alternative solutions (e.g. remote cameras) may be considered, provided the IHF and the relevant team approve it.

13. Precautions for spectators

In order to avoid overcrowding and allow for physical distancing in the arenas, only a limited number of spectators will be allowed at the matches. Depending on the development of the pandemic during the World Championship, the Medical Commission will decide on the capacity of each arena, considering that a distance of 1.5m must be maintained at all times (chessboard seating arrangement).

To enter and exit the arena, different routes must be elaborated. Crowding of spectators at the entrance and exit of the arena should be avoided at all times. Alcohol and tobacco are prohibited in the arena. Spectators are only allowed in the Blue Zone (see chapter 9.3.). Any staff working in the spectator area must not mix with anyone working in the other Zones.

Upon entering the arena, all spectators must have their temperature taken. In case the temperature is 38°C or higher, he/she is not allowed to enter the arena. The same applies if the person shows any symptoms indicative of COVID-19 as described in chapter 2.1.

Hand disinfectant should be used regularly and masks must be worn at any time from entering the arena, until exiting. Anyone not wearing a mask will be removed from the arena.

Children up to the age of 12 will not be allowed to enter the arena, neither alone nor escorted by an adult.

As per chapter 2.3., spectators must be made aware of the COVID-19 preventive measures.

A safety zone will be installed between the Red Zone and the Blue Zone (see chapter 9.3.).

All camera positions within the spectator area must be in isolated cabins.

Waste bins with lid should be provided throughout the arena and a safe waste removal must be ensured.

14. Precautions for meetings

14.1. Technical Meetings

Technical Meetings can be organised with the following precautions in place:

- A maximum of two (2) persons per National Federation is allowed to attend;
- The room for the Technical Meeting must be big enough to allow for physical distancing;
- A distance of 1.5m should be kept between the tables;
- Special paths for entering/leaving the room must be created.

All preventive measures listed in chapter 2.3. must be respected.

14.2. Other meetings on the fringes of the event

In the event, meetings are held in closed places, the number of attendees must not exceed 50% of the capacity of the meeting place to allow for physical distancing. A distance of 1.5m must be maintained at all times.

Seating must be numbered and the duration of the meeting should be limited as much as possible.

All preventive measures listed in chapter 2.3. must be respected.

15. Key rules of infection prevention

The following 10 key rules should be respected in order to reduce the risk of infection:

1. Washing hands with soap and water for at least 20 seconds is essential for preventing infectious diseases.
2. Natural ventilation is the best.
3. Do not touch other people's items and do not touch railings and other surfaces unless necessary.
4. Use your personal items.
5. Keep physical distancing.
6. No handshakes, no hugging, no kissing.
7. Waiting outside while maintaining a physical distance is better than waiting inside and queuing.
8. Avoid mass gatherings and crowding.
9. Eat healthy food, sleep enough and exercise to enjoy good health.
10. Follow the COVID-19 basic preventive measures to protect your health and the health of other people.



16. References

'COVID-19 Medical Precaution Plan' developed by the Medical Commission of the 27th IHF Men's World Championship in coordination with the Preventive Medical Sector of the Egyptian Ministry of Health and Population and confirmed by the IHF COVID-19 Medical Task Force

- ['Back to Handball – Hygiene Concept'](#) developed by the European Handball Federation
- ['Return to Play Protocol'](#) developed by the Union of European Football Associations
- [WHO guidelines for prevention and management of COVID-19](#)
- Guidelines of the Egyptian Ministry of Health and Population

Annex 1

Terminology

IHF COVID-19 Medical Task Force:

Composition:

Chairperson:

Prof. Hosny Abdelrahman Ahmed, Professor and President of the Benha Faculty of Medicine Sports Medicine Department, Chairman of the IHF Anti-Doping Unit (ADU)

Members:

Prof. Hazem Khamis, Professor of Cardiology, Chairman of the Medical Commission of the 27th IHF Men's World Championship and General Manager of Wadi El-Neel Hospital Cairo

Prof. Maria Borodina, Expert working with World Health Organization (WHO) on mass gatherings

Dr Ute Enderlein, World Health Organization (WHO) European Office, member of the WHO regional technical mass gatherings team

Mr Dietrich Späte, Chairman of IHF Commission of Coaching and Methods (CCM)

Mr Robert Müller von Vultejus, Chief Growth Officer of Sportfive

Mrs Amal Khalifa, IHF General Director

Mr Patric Strub, IHF Competitions Director

Partial participants:

Dr Hassan Moustafa, IHF President

Dr Ashraf Sobhy, Minister of Youth and Sports of Arab Republic of Egypt

The IHF COVID-19 Medical Task Force was created as per the decision of the IHF Executive Committee on 1 July 2020 in view of the unprecedented situation of the global COVID-19 outbreak and shall create handball-event and operation-specific medical guidelines to be implemented for upcoming IHF competitions, aiming to ensure that all national teams and Member Federations participating in IHF competitions implement medical precautions from the day of the restart of the national team's preparation until their arrival at home after the competition.

Medical Commission:

Composition:

Chairperson:

Prof. Hazem Khamis, Professor of Cardiology, General Manager of Wadi El-Neel Hospital Cairo

Members:

Dr Ahmed Ashraf, Executive Director of Wadi El-Neel Athletic Heart Center

Dr Ahmed Hamdy, Director of the General Administration of Sports Psychology, Ministry of Youth & Sports

Dr Alaa Eid, Head of the Preventive Medicine & Endemic Diseases sector, Ministry of Health

Dr Ibrahim Hassan, Head of the Central Administration of Urgent & Critical Care sector, Ministry of Health

Dr Khaled Massoud, Head of the Central Department of Sports Medicine, Ministry of Youth & Sports

Dr Mohamed Mostafa Gad, Chief Executive of the Egyptian Ambulance Organization
Dr Mohamed Saad, Assistant of the General Manager of Wadi El-Neel Hospital
Dr Mostafa Ghoneima, Head of the Curative Care sector, Ministry of Health
Dr Ute Enderlein, World Health Organization (WHO) European Office, member of the WHO regional technical mass gatherings team
Prof. Maria Borodina, Expert working with World Health Organization (WHO) on mass gatherings
Prof. Dr Nancy ElGuindy, Head of the Central Public Health Laboratories, Ministry of Health

The Medical Commission of the 27th IHF Men's World Championship in Egypt is responsible for implementing the present COVID-19 Medical Precaution Plan before, during and after the World Championship and dealing with all medical issues before, during and after the World Championship.

Advisory board for Medical Commission:

Composition:

Chairperson:

Prof. Hazem Khamis, Professor of Cardiology, Chairman of the Medical Commission of the 27th IHF Men's World Championship and General Manager of Wadi El-Neel Hospital Cairo

Members:

Prof. Hosny Abdelrahman Ahmed, Professor and President of the Benha Faculty of Medicine Sports Medicine Department, Chairman of the IHF Anti-Doping Unit (ADU)

Per Bertelsen, Chairman of IHF Commission of Organising and Competition (COC)

Ramón Gallego, Chairman of IHF Playing Rules and Referees Commission (PRC)

Dietrich Späte, Chairman of IHF Commission of Coaching and Methods (CCM)

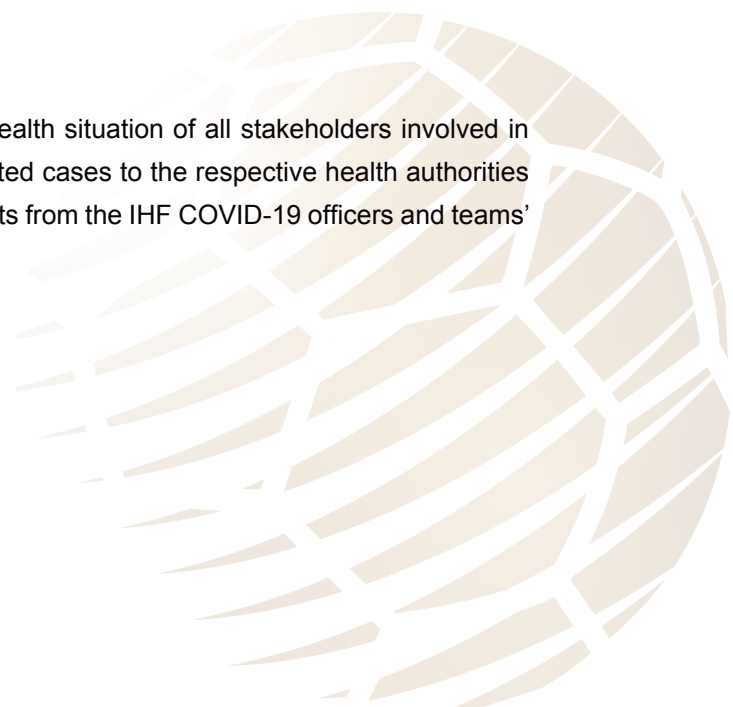
Dr François Gnamian, Chairman of IHF Medical Commission (MC, joining virtually)

Igor Vori, Acting Chairman of IHF Athletes' Commission (AC, joining virtually)

The advisory board for Medical Commission meets every day during the World Championship to review the procedures and positive COVID-19 cases, if applicable. It is responsible for confirming disqualifications of players, teams, coaches and referees and the remaining stakeholders in case of any positive test result.

Event chief medical officer:

Physician responsible for supervising the overall health situation of all stakeholders involved in the World Championship and reporting any suspected cases to the respective health authorities and the Medical Commission according to the reports from the IHF COVID-19 officers and teams' COVID-19 officers.



IHF COVID-19 officer:

Physician responsible for monitoring the health situation of the stakeholders (except teams), reporting to the event chief medical officer any symptoms or suspected cases and spreading the health awareness among all event participants after having been briefed by the Medical Commission on precautionary measures for the World Championship.

Team COVID-19 officer:

Physician responsible for monitoring the health situation of the respective participating team, reporting to the event chief medical officer any symptoms or suspected cases and spreading the health awareness among all event participants after having been briefed by the Medical Commission on precautionary measures for the World Championship.

Bubble:

Group of people being accommodated at the same hotel and working at the same arena without any external contact throughout their stay (from arrival to Egypt until departure).

Delegation:

Players and officials of the 32 teams participating in the World Championship (players, head of delegation, head coach, assistant coach, goalkeeper coach, physiotherapist, physician, team official, and support staff).

Stakeholders:

Any person involved in the World Championship, including but not limited to players and officials of participating teams, IHF nominees, Organising Committee, drivers, media representatives, TV production crew, marketing representatives and board manufacturers, COVID-19 officers, Team Guides, volunteers, hotel staff, catering staff and waiters, cleaners, doctors, medical staff, Doping Control Officers, chaperones, training halls' and arenas' staff, other support staff (speakers, statistics, etc.).

PCR test:

PCR is the abbreviation for polymerase chain reaction, which is a technique for rapidly producing many copies of a fragment of DNA for diagnostic or research purposes (Collins Dictionary: <https://www.collinsdictionary.com/dictionary/english/pcr>).

In the context of COVID-19, a PCR test is a diagnostic test to determine whether or not a person has an active coronavirus infection.

Personal protective equipment (PPE):

Kits including hand disinfectant and face masks.

Note: The present document is subject to updates on a regular basis.

