



PROTOCOL FOR OFF-SEASON TRAINING - 2020

The health of Player and Club personnel remains the League's top priority in providing for the opening of Club facilities during the off-season. It is also essential for Players to have an opportunity to engage in proper conditioning prior to the commencement of training camp on a strictly voluntary basis. With this in mind, the League has adopted preventative measures to be implemented during the off-season to help protect against contraction of COVID-19, as well as procedures regarding detection of infection and transmission of COVID-19. To the extent feasible, these measures and procedures are consistent with Collective Bargaining Agreement provisions regarding off-season training (e.g., CBA Subsection 15.11) which provisions remain in effect unless expressly amended in this Protocol.

The NHL has worked closely with the NHLPA in establishing the framework for this approach. It has also developed this approach with the input of both the NHL's and the NHLPA's respective medical, epidemiology and infectious disease experts as well as Club medical personnel. This Protocol, while very comprehensive, cannot mitigate all risk. A range of clinical scenarios exist, from very mild to fatal. COVID-19 generally affects older age groups and those with previously existing medical conditions, more so than younger, and otherwise healthy, individuals, and we recognize that Players and personnel have family and household members who may fall into these vulnerable categories.

A. GENERAL

Each Club shall open its training facility in the Club's home city in order to permit gatherings of small groups of Players to engage in individualized training activities on a voluntary basis, as set forth in detail below. Clubs shall be required to open such facilities by seven (7) days after receiving notice from at least five (5) Players that they intend to use the facility for off-season training (hereinafter "Off-Season Training"), but in no event earlier than October 15, 2020. Clubs, at their discretion, may choose to open their facilities at an earlier date than set out above. A maximum of 12 persons will be permitted on the ice at any one time, and an additional number of Players are permitted elsewhere in the facility as determined to be appropriate by the Club Medical Director and local infectious diseases specialist. (See Paragraph I(1) – "Off-Season Training – Permitted Personnel – Players") Players will be under no obligation to attend at the Club's facility and, unless this protocol expressly provides otherwise, the provisions of CBA Section 15.11 shall be strictly enforced. (See Attachment 1)

Further, this activity will be permitted only in those jurisdictions where the applicable health authorities have sufficiently relaxed local restrictions to permit such gatherings. Clubs will notify the League with the intended opening date of its facility for Off-Season Training, including Clubs who have previously re-opened for "Phase 2" and "Phase 3", whether or not as part of the 2019/2020 Return to Play plan. Further, Clubs are required to comply with the public health mandates and recommended best practices of the CDC and/or Public Health Agency of Canada ("Health Canada") applicable to them and the facility in which Off-Season Training activities are to take

place, including any changes to such recommendations that may take place after the commencement of Off-Season Training. Clubs who are unable to allow access to Players in their facility as contemplated by this Off-Season Training protocol or who are concerned that their operations do not satisfy public health recommendations shall notify Bill Daly or Julie Grand, so that we can work with the Club to determine alternative arrangements.

B. QUARANTINE REQUIREMENTS

Prior to the commencement of Off-Season Training activities, some individuals (Players and “Permitted Personnel” – see Paragraph I (1-3)) traveling back to their Club’s home city may be required to serve a 14-day self-quarantine imposed by the local or federal health authorities before they may enter the Club facility. Even if not imposed by the local health authorities, individuals returning to the Club’s home city by *public* transportation, including commercial air or rail travel, will normally be required to serve a 14-day self-quarantine period post-travel before engaging in training activities at their Club’s facility. In addition, Club Medical personnel may impose a 14-day quarantine on Players and Permitted Personnel returning to the Club’s home city from a high-risk environment, even if they are not travelling via public transportation. The NHL in consultation with the NHLPA has provided guidelines to Clubs for the designation of high-risk environments. (see Attachment 2)

Except where a 14-day quarantine is required by the local health authority or by federal law (in which event the quarantine must be observed as stipulated), the 14-day quarantine requirement imposed by the Club Medical personnel after returning to the Club’s home city by public transportation (including commercial air or rail travel), or returning from a high risk environment, may be substituted by a shorter time frame combined with a testing regimen as follows: (a) 7-day quarantine with PCR testing on days 1, 3, 5 and 7, with results available on day 8; and (b) provided all such tests are negative, the Player remains asymptomatic and afebrile, and the local infectious disease consultant agrees, the Player can start training.

Players shall avoid carpooling together from one location to the Club’s home city. To the extent such carpooling occurs, post-travel quarantine for individuals involved shall be considered at the Club’s discretion.

C. TESTING FOR INFECTION AND ANTIBODIES

As an over-riding principle, testing of asymptomatic Players and Club personnel must be conducted in the context of excess testing capacity, so as to not deprive health care workers, vulnerable populations and symptomatic individuals from necessary diagnostic tests (“Publicly Necessary Testing”). It is also essential to note that testing, by its nature, is for the early detection of infection and is not a replacement for the hygiene, distancing, and cleaning and disinfecting methods outlined in this framework that can help prevent infection in the first instance.

Laboratory-based RT-PCR testing shall be administered to all Players and Club personnel designated to have “Player Access” (see Paragraph I (2) below) forty-eight (48) hours prior to any person returning to Club training facilities in order to detect active or recent infection (with results to be available within twenty-four (24) hours). For individuals whose results are not received within twenty-four (24) hours, such persons shall not utilize Club training facilities until results are available and indicate a negative testing result.

Clubs shall make arrangements for, and shall administer, PCR testing to all Players and Club personnel with “Player Access” prior to the commencement of Off-Season Training activities, and at least twice weekly thereafter (or more frequently if consistent with medically recommended intervals) throughout the period of the Player’s participation in Off-Season Training.

Clubs shall provide to the League and to the NHLPA, on an ongoing basis, details of the arrangements that have been made in respect of the availability of testing and the provision of exemptions or exclusions to local stay at home guidelines or orders.

Should Clubs elect (or Players request) to conduct serology testing, such testing should be an FDA, NIH or Health Canada approved serology test. For clarity, FDA should be at the level of approval, not only emergency use authorization (EUA). Further, serology testing may be conducted only with the Player's express written consent. It is presently not known to what extent a positive antibody test confers immunity and, as such, all Players and Club personnel shall practice the same prevention measures outlined in this document regardless of their antibody status. Players shall be cautioned that the results of serology testing are not an appropriate basis for individual decision-making in respect of measures to be taken to prevent the spread of contagion, and are under no circumstances to be considered a basis upon which to decline to follow the measures set out in this Protocol.

D. TEMPERATURE/SYMPTOM CHECKS

Each Club shall establish a process to record symptoms and conduct temperature checks on a daily basis, and not more than two (2) hours prior to each Player's and Club personnel with "Player Access's" entry to the Club facility. These checks shall be self-administered at the homes of Player and Club personnel with "Player Access" prior to their departure for the Club's facility. Clubs shall obtain any necessary equipment, including digital oral thermometers, for use by Players and such Club personnel. See Paragraph G (Symptomatic Persons During Off-Season Training Activities), below, which sets forth processes if Players and/or "Player Access" Club personnel develop symptoms, report a temperature >99.5°F or > 37.5°C, or are otherwise directed by the standardized self-screening checklist to follow the symptom-reporting procedure.

Additionally, each Club must administer a separate temperature and symptom check at the entrance of the Club facility before any Player or Club personnel with "Player Access" shall be allowed to enter. Temperature checks shall be conducted by the Club Facility Hygiene Officer (see Paragraph O) or a comparably qualified individual using a non-contact infrared thermometer. Any abnormal result using the non-contact infrared thermometer should be followed up with a confirmatory check using a tympanic membrane or hospital-grade oral thermometer. The Club's Facility Hygiene Officer (see Paragraph O, below) shall oversee implementation of this procedure, and the guidance of the Club's local infectious diseases expert shall also be sought in connection with such implementation. The Clubs shall take appropriate measures to protect the privacy of the information collected and to maintain the security of the information collected. The information collected shall not be entered into the Player's AHMS records and shall be kept separately.

Similar symptom and temperature checks shall be conducted on site for all other "No Player Access" Club personnel (see Paragraph I (3) below) at the time of their entry into the building. The Club Facility Hygiene Officer (see Paragraph O below) shall designate personnel who will be responsible for maintaining a daily log of the Players and Club personnel who were permitted into the building and for recording these symptom and temperature checks in accordance with applicable regulations. Temperature checks for "Player Access" and "No-Player Access" Club Personnel shall be conducted in a way that protects employee privacy to the extent possible. Any information collected shall be kept separate from a "personnel file" for the individual involved. Other local restrictions and regulations may be applicable so consultation with local counsel may be appropriate.

E. EDUCATION SESSION

Prior to the start of Off-Season Training activities, the Club's Medical Director and Head Athletic Trainer shall conduct a remote educational meeting for any Players, "Player Access" personnel and "No Player Access" Club personnel who have not previously received one, to provide education regarding COVID-19, including the Off-Season Training Protocol, the potential risks associated with involvement in Off-Season Training or in training camp or in the Regular Season, and the obligations of Players and Club personnel to comply with the provisions of this Protocol, and to provide an opportunity for Players and "Player Access" Club personnel to ask questions regarding the current situation.

The League will provide Clubs with a template PowerPoint to be used during these education sessions, as well as other educational materials such as posters to be displayed throughout Club facilities.

The above educational content shall be developed in consultation with the NHLPA.

F. CARDIAC SCREENING

Players are not required to undergo a PPME for the purposes of participation in Off-Season Training in the facility. However, anyone who has had COVID-19 shall have a cardiac screening, as the CDC instructs that certain individuals are at high-risk for severe illness from COVID-19, including, without limitation, people of all ages with underlying medical conditions, particularly if not well controlled. (<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html>). Accordingly, before being permitted to participate in off-season training at the facility, Players shall be screened to determine whether they have previously contracted COVID-19 or whether they are at high risk for severe illness from COVID-19. The cardiac screening requirements are set forth in Paragraph G(5) below.

G. TESTING AND MANAGEMENT OF SYMPTOMATIC AND/OR COVID-POSITIVE PERSONS

Any person who participates in Off-Season Training or who otherwise will be present in the Club facility during the period of Off-Season Training who develops symptoms (or if persons sharing a home develop symptoms or test positive for COVID-19) shall immediately notify Club medical staff of such, shall self-isolate, and shall be medically evaluated by the Club's physician(s), who shall consult with the Club's infectious disease expert to determine next steps, and administer PCR testing, if appropriate.

All participating Players and Club personnel shall immediately notify Club medical staff if he or she suspects coming into contact with someone that has COVID-19. The following are common symptoms of COVID-19:

- Cough
- Shortness of breath
- Chest pain
- Feeling feverish, chills
- Muscle pain or fatigue (not exercise-related)
- New loss of smell or taste
- Gastrointestinal symptoms (nausea, vomiting and/or diarrhea)
- Sinus or cold-like symptoms (headache, congestion/runny nose, sore throat).
- Fever (temperature > 99.5°F or > 37.5°C)

If a Player or any other person that has had access to the training facility tests positive in the course of PCR testing and/or develops symptoms of COVID-19, the following steps shall be taken by the Club physician(s)¹ working in concert with the Club's infectious diseases expert:

1. IMMEDIATE ISOLATION PENDING CONFIRMATION

If the person is at the training facility and medically stable, they shall be:

- removed immediately and shall be directed to isolate and to refrain from contact with other persons until the confirmation of COVID-19 positive/negative status is established.

¹ Throughout this document, references to "Club Physician" and "Club medical staff" will also include other physicians and medical personnel, where applicable.

- If the person is at their residence and medically stable, they will be instructed to remain in place and not to come to the training facility pending confirmation of their COVID-19 positive/negative status.

In the event the person is acutely ill or medically unstable, the Club physician, in consultation with the Club's infectious disease expert, shall arrange appropriate clinical follow up, treatment and care.

2. CONFIRMATORY TESTING FOR ASYMPTOMATIC PERSONS

For asymptomatic persons who test positive, the Club Physician shall:

- immediately direct the administration of a confirmatory FDA Emergency Use or Health Canada Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA ("RT-PCR test").
- The confirmatory test will use a nasopharyngeal RT-PCR test performed by an independent health care provider to verify the initial test result.
- Persons who are isolating while awaiting confirmation of their COVID-19 positive status shall be in communication with Club medical staff on a regular basis and will receive such medical treatment as is appropriate to their condition.

Persons whose confirmatory test results return **positive** will be considered a confirmed positive, and shall be required to isolate until medical clearance is obtained.

If the confirmatory test results return **negative**, the person shall remain in isolation and shall be retested after 24 hours with a nasopharyngeal RT-PCR test performed by an independent health care provider. If such test results remain negative, the person shall be permitted to exit isolation and may return to full participation in training activities, once cleared by the team physician in consultation with the Club's infectious disease expert after review of the specific circumstances surrounding the initial positive test.

3. STEPS FOR SYMPTOMATIC PERSONS

For persons who develop symptoms of COVID-19, the Club Physician shall direct immediate RT-PCR testing to confirm the person's status.

A positive test of a person who exhibits symptoms of COVID-19 shall not be subject to further confirmatory testing under this Protocol and such person's COVID-19 positive status will be considered confirmed if, in the opinion of the Club Physician and the Club's infectious diseases expert, there is no basis to doubt the person's COVID-19 positive status.

Persons who develop infectious respiratory symptoms but who test negative for COVID-19 shall have their clinical care and clearance managed by the Club Physician in consultation with the Club's infectious disease expert.

4. SELF-ISOLATION UPON CONFIRMATION OF COVID-19 POSITIVE STATUS

A person whose COVID-19 positive status has been confirmed shall remain in isolation, shall not exercise, and shall not participate in any training activity or have any contact (other than remotely) with any other personnel for the duration of their isolation.

During such period, the person shall be in daily contact with and receive remote care from Club medical staff or such other physicians as considered appropriate. A person whose initial test has been confirmed positive shall remain in isolation until the following conditions have been satisfied:

a) For a person who was asymptomatic during the entire period of their isolation:

Test-Based Strategy:

- The person has tested negative after the administration of a RT-PCR test from at least two consecutive, respiratory specimens, nasopharyngeal where feasible, collected ≥ 24 hours apart for a total of two negative specimens (the “CDC Test-Based Strategy”); or

Time-Based Strategy:

- Alternatively, upon the passage of 10 days since the first positive test, providing the person has remained asymptomatic during the entire period of their self-isolation

b) For a person who was symptomatic at the time of testing, or who developed symptoms during the period of isolation:

Test-Based Strategy:

- The person has tested negative twice on the basis of the CDC Test-Based Strategy after the resolution of any fever (without use of fever-reducing medications) and has experienced improvement in respiratory symptoms (e.g., cough, shortness of breath); or

Time -Based Strategy:

- Alternatively, if the person has had no fever (without the use of fever-reducing medication) and no respiratory symptoms for over 72 hours provided, however, that the person has been in self-isolation for a minimum of 10 days since the onset of the symptoms,

c) In addition, the Club Physician, its infectious diseases expert, and any treating physician providing care to the person conclude that the person no longer presents a risk of infection to others, and that it is medically appropriate (given individual and local circumstances) to terminate the requirement for self-isolation, and

d) Finally, the termination of the isolation requirement must be consistent with applicable local public health regulations or other requirements.

5. CARDIAC SCREENING

Although Players may exit isolation as per Paragraph G(4) (above), the Player must continue to refrain from exercise for a total of a 14-day period from the time of the first positive test (or such shorter period as set out below). Upon completion of the period of isolation, Players shall receive cardiac testing as set out in the provisions regarding Pre-Participation Medical Examination in the Phase 3 Protocol, including, at a minimum,

- ECG,
- echocardiogram and
- high sensitivity troponin.

If the Player remains asymptomatic and all investigations (done after exiting isolation) are negative, consideration can be given to starting low-grade exercise prior to the 14-day time frame. The Team Physician shall make this determination in consultation with a cardiologist and infectious disease specialist.

All Players must be cleared as “fit to play” by a cardiologist and team physician before returning to training activity.

6. EXHIBIT 25-A

In the event a Player is diagnosed with a confirmed positive finding for COVID-19 (or has a resulting and/or related illness), the Club Physician shall issue an Exhibit 25-A designating the Player as “unfit to play”, the Player shall be deemed to have sustained an illness arising out of the course of his employment as a hockey player for such period as he may be removed from training, practice or play, and his condition shall be treated as a hockey related injury for all purposes under the Collective Bargaining Agreement, unless it is established, based on the facts at issue, that the Player contracted COVID-19 or the resulting or related illness outside the course of his employment as a hockey player.

7. DISCLOSURE

Absent prior approval by the League (who shall consult with the NHLPA), there shall be no disclosure by the Club to the media or to the public of information relating to a positive test result or to a person developing COVID-19 symptoms during Off-Season Training.

8. PERSONS WITH CLOSE CONTACT

In the event of an initial positive finding for COVID-19 for a person covered by this Protocol (“Index Person”):

- Club Medical, with their ID expert, shall conduct a contact tracing immediately upon receiving the Index Person’s first positive test, which shall done in conjunction with, and pursuant to, regulations from local health authorities (if any), to determine whether other Players or any other person that had access to the training facility had “close contact” with the Index Person.
 - The team physician or infectious disease expert may also seek to identify other people, not covered by this Protocol, who have been in contact with the Index Person, including family and other household members, as appropriate and consistent with, regulations of local health authorities.
- Any such person shall be considered to be a “Close Contact” if they have been in contact **for 15 minutes or longer at 6 feet or less** with the Index Person (regardless of whether facial protection is worn) in the 48 hour period leading up to the time the Index Person’s test was taken (if asymptomatic), or 48 hours prior to the onset of symptoms in the Index Person.

Close Contacts shall be tested immediately through the administration of a RT-PCR test.

Close Contacts whose test results are **positive** for COVID-19 shall:

- be subject to the provisions of Paragraph G(1) of this Protocol regarding test confirmation and isolation.

Close Contacts who test **negative** for COVID-19 shall:

- be subject to daily symptom and temperature monitoring and daily PCR testing for 14 days; and
- shall not be subject to quarantine provided that the following conditions are satisfied for such 14 day period:
 - i. The person remains asymptomatic and afebrile (free of fever), and
 - ii. The results of PCR testing are negative on each occasion.

NOTE: In the event that the Index Person is subsequently found to be negative on confirmatory testing, the Close Contact measures no longer apply.

During the 14-day period described above, the Close Contact shall be reminded of their obligations to observe the requirements regarding social distancing and use of PPE.

Upon developing any symptoms consistent with COVID-19 or if any PCR test results return positive, the Close Contact shall be required to immediately end their participation in any Club activity, shall self-isolate, shall contact the Club physician and, thereafter, shall be subject to the applicable provisions of this Protocol.

The requirements for quarantine and testing upon “close contact” set out in this Paragraph are, in all events, subject to any government-mandated requirements or directions and shall be complied with notwithstanding anything set out in this Protocol.

9. FUTURE TESTING FOLLOWING A POSITIVE TEST

In the event that a Player (or essential personnel) has a confirmed positive finding for COVID-19 and thereafter has been cleared to return to play, ongoing screening with PCR testing is unnecessary for a period of three (3) months, as PCR-based testing results may remain positive for a prolonged period of time after resolution of symptoms, with unknown significance. Notwithstanding the foregoing, if such Player subsequently exhibits symptoms of COVID-19 or has been exposed to potential infection through close contact with an infected person, his COVID-19 status shall be determined on the basis of a clinical assessment by the Club medical staff and the infectious disease expert, which assessment may, in their discretion, include PCR testing as one element. In the event that subsequent data are published demonstrating value in different testing modalities (e.g., antigen or antibody), the above strategy may be altered.

Club personnel are asked to notify Bill Daly if they become aware of Players or other Club or arena personnel who test positive for COVID-19 during Off-Season Training. The League thereafter shall promptly notify the NHLPA of Players’ positive test result(s).

H. OFF-SEASON TRAINING – PERMITTED ACTIVITIES

Permitted activities must allow for appropriate social distancing (as described below) to be followed and are limited to only the following:

- “Player-only” non-contact skates. No coaches, skating coaches, other Club employees or Club contracted representatives may participate in any on-ice sessions except as set out in Paragraph I(1) below.
 - On-ice time shall be divided equally between the skaters within each small group (goaltenders may be provided additional ice time). When Players are not participating in on-ice activities they will be permitted to utilize the Club’s exercise and weight room equipment, or receive individual treatment from the Club’s Medical / Training staff (see Paragraph I(2) below).
- Weight training that does not include the need for a spotter;
- Circuit-based activities such as resistance training;
- Cardiovascular exercises and endurance training; and
- Rehabilitation and treatment for Players with on-going disabling injuries and for Players with non-disabling injuries, may be provided as directed by Club Medical / Training staff.

Players who participate in Off-Season Training and Players of the Club who are resident in the Club city but who are not participating in Off-Season Training are not permitted to work out or skate at any public facility or other location, and may not organize any Player skates or group skates outside of the training sessions organized by the Club.

Unintentional or incidental observations of Player non-contact skates by coaches or Hockey Operations personnel because of physical location in the building or otherwise, are not prohibited.

Fitness testing of Players by Clubs will not be permitted during Off-Season Training.

I. OFF-SEASON TRAINING – PERMITTED PERSONNEL

As a guiding principle, the greater the number of persons involved in each Club's Off-Season Training activities, the greater the risk of possible infection. In order to limit the possible exposure and risk of transmission during Off-Season Training, activities must be limited to essential staff on site.

1. PLAYERS:

As indicated above, Clubs shall schedule Players in small groups, on a voluntary basis, to participate in separate sessions, with a per session maximum of 12 persons on the ice at any one time, plus such additional Players elsewhere in the facility as may be determined to be appropriate by the Club Medical Director and local infectious diseases specialist. In making the above determination, the infectious diseases specialist shall consider whether the Club facility is able to accommodate safely the number of off-ice Player participants proposed by the Club with appropriate social distancing as well as its compliance with local health regulations. The Club shall notify the NHL and the NHLPA of its infectious diseases specialist's determination before Players will be permitted to enter into the facility.

- For the duration of Off-Season Training, Players shall remain in the same small group, so that any infection or exposure that might occur will be contained within that group and in order to facilitate contact tracing.
- The maximum number of Players permitted in the weight room shall be six (6). If the facilities' weight room cannot accommodate six (6) Players with the appropriate social distancing at all times, then the number of Players who engage in weight training at any one time shall be reduced to an appropriate number to ensure such distancing can occur, and the remaining Players from the small group may engage in an on-ice session at the same time, during which they shall refrain from body contact and shall be required to maintain appropriate distancing from the nearest Player. (See Paragraph H, above). The Club's Facility Hygiene Officer shall notify the NHL and the NHLPA of any reduction in the number of Players permitted in the weight room.
- Notwithstanding the provisions of CBA Section 15.11, a goaltender or other Player may also invite the participation of the Club's goalie coach (or an independent goalie coach at the Club's discretion) or the Club's skating coach or instructor (or an independent skating coach or instructor at the Club's discretion) to work with them. If an independent goalie coach or skating coach or instructor is utilized, such person shall be subject to all of the same requirements as other Player Access Personnel (testing, temperature, and symptom screening, quarantine, etc.)
- Neither the goalie coach nor the skating instructor(s) should engage in any Player interaction outside of the on-ice instruction. Specifically, and in addition to other potential Player interactions, these coaches should not be permitted access to Player dressing rooms.
- Players can also be seen by the Athletic Trainer while the weight room and/or on ice sessions are occurring.
- The on-ice maximum of twelve (12) persons at a time includes goalie coaches or other instructors.

- Each group of Players shall be provided with a particular “shift” start time and session duration. Players are not permitted access to the facilities outside of their designated group shift. Player “shifts” or sessions shall not overlap with one another.
- The schedule must allow for sufficient time between sessions to allow for proper disinfecting of training facilities and equipment, and to ensure that there is no overlap between Players departing and the next group arriving.
- If Players are present in the locker room at the same time, they must appropriately socially distance at all times (i.e., be at least 6 feet apart). Clubs shall coordinate small group sessions that will allow for appropriate spacing between players’ designated stalls in the locker room.
- Given the importance of personal hygiene in infection control, Players are encouraged to shower in the facilities after workouts, providing distancing can be maintained. If they prefer, Players can choose to shower at home. Players shall not be permitted to share towels, toiletries, or any personal items. Players must wear their own footwear at all times, including in the shower stalls.
- Clubs shall devise a schedule for Player sessions which reflects the needs and circumstances of: (i) Club Medical / Training staff, (ii) the number of Players participating, and (ii) that allows for proper cleaning and disinfecting between group sessions (see Paragraph L, below).

Each Club shall provide the League and the NHLPA with their Player group lists by a date certain (to be determined at a later time) prior to the Club’s opening of facilities for the purposes of Off-Season Training. Updated lists can be sent to Bill Daly or Julie Grand (NHL) and Don Zavelo (NHLPA) as additional Players travel to your Club’s home city and become eligible to participate in the group activities following the completion of testing and/or any required quarantine period.

The Club’s Facility Hygiene Officer (see Paragraph O below) shall designate an individual who will be responsible for observing compliance with the provisions in this Paragraph I(1).

2. CLUB MEDICAL/TRAINING STAFF:

The minimum number of essential staff shall be on-site to carry out the planned activities and have in-person interactions with Players. No other personnel shall be involved in any individual Player activities. Each Club will be permitted to have the same maximum number of personnel per small group session, which shall include any number of personnel from the following list, and no other personnel, per session:

- One Athletic Trainer
- One Strength and Conditioning Coach
- One Equipment Manager
- One Massage therapist and/or one chiropractor, if made available by the Club
- One or two dressing room attendants (if different from Club-engaged cleaning crews)
- Club’s Physician(s) on an as-needed basis

During Off-Season Training and notwithstanding the provisions of CBA Section 15.11, Clubs must, to the extent possible, assign a unique Athletic Trainer, Strength and Conditioning Coach, and Equipment Manager, respectively, to each small group of Players, so as to limit cross-exposure among groups. To accomplish this, it may be desirable to involve additional personnel, such as those from the Club’s AHL affiliate.

Players may access massage and chiropractic services outside of the Club facilities, but must ensure that service provider(s) use personal protective equipment (“PPE”) including face coverings and maintenance of the Cleaning and Disinfecting Guidelines (see Attachment 3) by both the Player and such services provider(s).

As described herein, Club Medical /Training staff will be designated as “Player Access” Club personnel. At the Club’s facility, “Player Access” Club personnel will be permitted to have in-person interactions and close contact with Players and other “Player Access Personnel”, but shall not have in-person interactions or close contact with “No Player Access” Club personnel (see Paragraph I (3) below).

Club Medical/Training staff may remain at the Club facility outside of their designated Player session(s), subject to continued compliance with all other social distancing measures and safety precautions as required by this document, to accommodate additional duties such as individualized work in a designated office. Club Medical/Training staff must not be assigned or engage in other duties while at the Club facility that would expose them to contact with equipment or materials that have been handled by “No Player Access Personnel”.

A certified Athletic Trainer/Therapist who holds current certification in Basic Life Support (BLS) and is licensed by their state or provincial authority in the jurisdiction of the Club shall attend each group session.

3. CLUB HOCKEY OPERATIONS PERSONNEL AND CLUB BUSINESS STAFF:

If the local health restrictions allow for it, and a Club allows staff members not involved in the in-person interactions with Players to also resume working at the Club facility (e.g., staff such as Club Hockey Operations personnel, Club business staff), the Club shall establish processes to ensure that such personnel:

- (i) Do not have close contact or in-person interactions with Players or touch surfaces or objects that a Player is likely to touch;
- (ii) Do not have close contact or in-person interactions with “Player Access” Club personnel or touch surfaces or objects that “Player Access” Club personnel are likely to touch;
- (iii) Take all other applicable social distancing and safety precautions outlined in this memorandum; and
- (iv) If Club business staff are able to continue to work remotely, it is strongly recommended that such individuals do not enter the Club facilities during Off-Season Training.

To emphasize, in-person interactions and all close contacts between Players and “Player Access” Club personnel, on the one hand, and “No-Player Access” Club Personnel, and in particular the Club’s Hockey Operations staff, on the other hand, are strictly prohibited, during Off-Season Training. If it is necessary for Hockey Operations and Club business personnel to be present at the Club facility during Off-Season Training, Clubs shall, to the extent possible, prohibit their access to areas of the facility utilized by Players and “Player Access” personnel.

As described herein, Club Hockey Operations Personnel and Club business staff will be designated as “No Player Access” Club personnel.

Clubs are not required to include on the “No Player Access” list any Club employee who has **no possibility** of coming into contact with, or having any interaction with, Players or Player Access Club personnel while on-site at the Club practice facility or game arena during the period of Off-Season Training, during any of the following circumstances:

- When entering the Club facility (i.e., separate entrances into the Club facility are required for Players and Player Access Club personnel, on the one hand, and anyone proposed for exclusion from this list, on the other hand);
- When exiting the Club facility (i.e., same as above); and
- While at the Club facility. In this regard, personnel proposed for exclusion from the list may not share common areas, hallways, lunchrooms, restrooms, or any other areas with Players or Player Access Club personnel.

Persons who are eligible for exclusion from the list are not subject to the other provisions in the Protocol applicable to the No Player Access Club personnel group, including, for example, Paragraph E of the Protocol (Education Session).

Anyone who cannot satisfy all of the criteria for exclusion must be included on the list of No Player Access Club personnel that is provided to the League.

With respect to specific categories of employees, please be advised as follows:

- Ice maintenance personnel shall be included on the list of No Player Access Club personnel, as they will be in the vicinity of Players for purposes of maintaining the ice; however, all efforts must be made by this group to avoid in-person interactions and direct contacts with Players and Player Access Club personnel. Ice maintenance personnel shall be subject to the testing program set forth in Paragraph C of the Off-Season Training Protocol.
- Additionally, as noted in the June 10, 2020 Memorandum, some personnel on the list of “No Player Access” Club personnel may still work in the vicinity of Players for purposes of their normal duties (e.g., ice cleaning crews, building maintenance, security, etc.). If any such personnel are working during the day when Players and “Player Access” Club personnel are present, **and will be in the vicinity of Players while working**, they shall be subject to the testing program set forth in Paragraph C. They shall also receive education on the relevant components of the Off-Season Training Protocol PowerPoint. While all personnel present at any time (day or night) shall receive education relevant to their job responsibilities, the testing requirement would not apply to staff whose work in the building is exclusively at night.
- For Clubs that maintain a chef on-site at the Club facility, these individuals must be designated as No Player Access Club personnel, and included in the list of such personnel provided to the League.
- Club Hockey Operations personnel may not be excluded from the No Player Access Club personnel list.

Additionally, each Club is permitted to include one Club Communications/Social Media representative in the Club’s “Permitted Personnel” during Off-Season Training, in the No Player Access Club personnel category. This individual is permitted to capture content, but is not permitted to have any interaction with Players, is not permitted to have access to locker rooms or training areas, and must at all times maintain social distancing from Players. All video content captured must be approved by the League prior to posting/distributing. This group shall be subject to all provisions applicable to the No Player Access group.

4. NON-PERMITTED STAFF: DURING OFF-SEASON TRAINING

The following individuals are prohibited from entering the Club facilities during Off-Season Training:

- a. Media
- b. Player agents
- c. Player Performance Personnel
- d. Player's family members
- e. Any other person(s)

5. USE OF FACILITY BY PLAYERS FROM OTHER CLUBS DURING OFF-SEASON TRAINING

Players from other Clubs who are residing during the off-season in proximity to the Club facility may request access to such Club's facility for the purpose of skating and the use of the weight room. Notwithstanding provisions of CBA Section 15.11, Clubs shall take all reasonable measures to accommodate such requests, and shall be permitted to refuse access based on the following considerations: (i) the unavailability of Medical / Training staff, (ii) the inability to schedule such other Clubs' Players to skate and work out; and (iii) the requirements for proper cleaning and disinfecting between Players' group sessions (see Paragraph L, below). In the event a Club is unable to accommodate such a Player's request, it shall immediately notify the NHL and the NHLPA for their review.

Any such other Club's Players would be subject to the same conditions and restrictions on access and use as are Players from the "host" Club except that, subject to the approval by the Player's Club Doctor, if there is a prior COVID-19 diagnosis, ECG testing shall be conducted in person at the "host" facility. In the circumstances where another Club's Players are granted access to a Club's facility, the host Club is responsible for ensuring that the Player follows all requisite safety and precautionary measures, including, but not limited to, testing, quarantine, daily symptom/temperature screening, etc. The host Club can bill the Player's Club for the reasonable costs of the testing and other services provided to another Club's Player(s).

J. SOCIAL DISTANCING, PPE AND OTHER SAFETY MEASURES

Please note that the following requirements denote the minimum standard Clubs must abide by during Off-Season Training. A Club, or any Player or member of the Club's staff may follow more stringent safety precautions while in the Club facilities should he/she choose to do so.

1. SOCIAL DISTANCING:

- Players and "Player Access" Club personnel shall maintain 6-foot physical distance ("social distancing") from each other at all times while in, and outside of, the Club facilities.
- Players shall be discouraged from socializing with one another in close contact while at (or outside of) the Club's facilities.
- The only exception to social distancing restrictions while in the Club facility would be medical encounters (e.g., one-on-one treatment sessions with an Athletic Therapist or physician examinations of a Player where physical distancing cannot be employed).

2. USE OF PPE:

In addition to maintaining social distancing from one another at all times, the following measures shall also be adopted regarding the use of PPE, such as a surgical mask or cloth face covering, and nitrile gloves. (NOTE: We recognize the priority use of PPE in your local communities by health care personnel and it is not our intention to take away access to PPE from such personnel by imposing these requirements.)

2.1 PLAYERS:

- Face coverings (cloth or surgical-type mask) shall be worn – other than while exercising -- when entering or leaving the Club facility and while inside the Club facility where social distancing cannot be maintained.
- Players are not required to wear face coverings when they are exercising or on the ice.
- If local health regulations would require Players to wear PPE while exercising during Off-Season Training, Clubs shall inquire whether an exemption can be attained or contact the League to evaluate alternative options for Player activities during Off-Season Training.

2.2 CLUB ATHLETIC TRAINERS, STRENGTH AND CONDITIONING COACHES AND PHYSICIANS:

- PPE must be worn while in close contact with the Players (surgical mask) and at all other times when inside the Club facility where social distancing cannot be maintained or when they are in areas of the facility that are commonly frequented by Players and other Club personnel.
- Face coverings (cloth or surgical-type masks) shall also be worn when entering or leaving the Club facility.
- Physicians shall wear gloves in medically necessary situations. The gloves shall be discarded and not reused after each small group session, or if working with Players in a one on one capacity, after each interaction. If an individual touches his or her face while wearing gloves, the gloves shall be discarded and replaced and the individual's hands and face must be thoroughly washed with soap and water.

2.3 EQUIPMENT MANAGERS & DRESSING ROOM ATTENDANTS/CLEANING STAFF:

- Shall always wear PPE (surgical mask and nitrile gloves). The gloves shall be discarded and not reused after direct contact with Players or Player equipment. If an individual touches his or her face while wearing gloves, the gloves shall be discarded and replaced. After gloves are removed and discarded, the individual's hands and face must be thoroughly washed with soap and water.
- All reasonable efforts shall be made to minimize Equipment Manager interactions with Players (*e.g.*, have Players discard their jerseys and other laundry such as workout clothes directly into laundry machines rather than being collected by Equipment Managers; have Players drop off equipment for cleaning in one designated area).

2.4 "NO PLAYER ACCESS CLUB PERSONNEL":

- Shall be in compliance with local health regulations regarding the wearing of PPE.

3. OTHER SAFETY MEASURES:

3.1 COMMUTING:

- Players shall avoid car-pooling or taking public transportation to the Club's facility (including rideshares and taxis). If no other alternative is feasible, the Club shall make arrangements to pick up and drop off the Player at his residence and all such drivers must wear gloves and a mask/face covering.

3.2 TUBS/SAUNAS/STEAM ROOMS:

- Hot and cold tubs may be used, providing social distancing is maintained and proper disinfecting is done between uses.
- Saunas and steam rooms are prohibited during Off-Season Training.

3.3 WORKOUT GEAR:

- Any team that provides practice gear for its Players shall establish a process that promotes safe, secure distribution of clean gear and the collection of used gear for prompt cleaning before the Player's next session.

3.4 SUPPLEMENTS:

- Supplements must be made available in single-dispense packs. Common containers and scoops shared by individuals are prohibited in Off-Season Training.

3.5 RELIEF GELS/BALMS/CREAMS/STICKS:

- Use of common (i.e. shared) creams, gels, balms, and sticks is prohibited during Off-Season Training.

3.6 FOOD/BEVERAGES:

- Players must use water bottles and lids that are permanently marked with their Player number or other means of identification.
- Clubs shall not provide meals for shared consumption at the Club facility.
- The Club's catering staff may provide pre-packaged meals in individual containers for each Player to be picked up while the Player is at the facility. Pre-packaged meals may not be consumed at the Club's facility, and shall be taken home and consumed at the Player's residence.
- Only single use beverages or snacks (i.e. granola or power bars) may be provided and consumed at the Club's facility.

K. OFF-SEASON TRAINING – PERSONAL SAFETY PRECAUTIONS

As a general matter, the following safety precautions shall continue to be followed:

- Wash hands frequently with soap and water for at least 20 seconds (sing “Happy Birthday” twice).
- If soap and water are not readily available, use an alcohol-based hand sanitizer.
- Hand sanitizer must be made readily available to all Players and Club personnel throughout the facility, and at a minimum, in the following locations:
 - Medical/Trainer Room
 - Equipment Room
 - Main entry to player bench
 - Coaches Room
 - Strength and Conditioning Area
 - Laundry Rooms
 - Dressing Rooms
- Wash or sanitize hands before eating and after touching possibly contaminated surfaces (such as high-touch areas).
 - Avoid touching your eyes, nose, and mouth.
 - Avoid close contact with people who are sick.
 - Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands.
 - Continue to avoid handshakes, high fives and fist bumps, even with individuals and teammates you know well.

L. CLEANING AND DISINFECTING

Each Club shall adhere to the requirements for regularly cleaning its facilities, as set forth in the attached 2019 NHL/NHLPA Medical Handbook 4.2 “Cleaning and Disinfecting Requirements,” (revised, May, 2020) (Attachment 3). ***Please note that these Requirements have been updated to include specific guidance regarding the maintenance and use of water bottles, towels, hand cleaners, tissues, anti-bacterial wipes and gloves.*** These standards are consistent with CDC recommendations on actions to help prevent the spread of respiratory diseases, including the coronavirus. (See <https://www.cdc.gov/coronavirus/2019-ncov/about/prevention-treatment.html>).

Clubs who have concerns about their ability to obtain sufficient amounts of cleaning and disinfecting solutions shall contact the League promptly.

At a minimum, during Off-Season Training, this cleaning must be completed:

1. prior to re-opening any Club facility;
2. on shared circuit-based training equipment between each Player usage (e.g., disinfectant wipe-down);
3. between small group training sessions on all areas and equipment that are touched; and
4. at the end of each day.

Further, if any area of the Club facility that the Players, or “Player Access” Club personnel, access (e.g., washrooms, training equipment, kitchen) is accessed by any “No Player Access” Club personnel during hours when the Players are not in the Club facility, each such area must be thoroughly and completely cleaned and disinfected prior to the next usage of such area(s) by the Players or “Player Access” Club personnel.

Clubs must ensure qualified professional cleaning personnel are retained to implement these requirements, and that all cleaning staff are provided, and understand the requirements of the Medical Handbook as it pertains to the cleaning and disinfection of the Club's facility.

M. ACTIVITIES OUTSIDE OF CLUB FACILITIES

Outside of the individual training to take place at Club Facilities, it is important that all Club personnel, including Players, continue to adhere to the personal precautions recommended by the CDC, as well as any additional direction that may be issued by your local health authority and Club Medical staff. As such, it is strongly recommended that Players continue to exercise "distancing" behavior, practicing the same social/physical distancing measures as observed during Phase 1 of the League's "pause" in the 2019/20 Season. Specifically:

1. Players and Club personnel shall continue to stay at home as much as possible and practicable and must avoid unnecessary interactions with non-family members.
2. Players shall not physically spend social time together in close contact unless face coverings are used.
3. As noted above, Players participating in Off-Season Training activities in the Club's facility are not permitted to work out or skate at any public facility or other location, except as may be permitted by the Club (which permission shall be provided in writing, including, at the Club's discretion, in circumstances where the Club does not maintain ice during the off-season), and may not organize any Player skates or group skates outside of the small group sessions organized by the Club.

N. CLUB FACILITIES

To the extent possible, and as resources allow, Club facilities shall be automated or made as "no-touch" as practicable, to reduce or remove the use of high touch areas (push-bar entrances, key-fob entry, etc.)

Clubs shall post signage throughout the Club facility with appropriate precautions (e.g., best practices for hand and respiratory hygiene) and identification of COVID-19 symptoms. (See Attachment 4.)

O. CLUB FACILITY HYGIENE OFFICER/COMPLIANCE

Each Club must appoint a Club Facility Hygiene Officer, who will be responsible for overseeing, implementing and ensuring compliance with all aspects of this Off-Season Training Protocol. The Club Facility Hygiene Officer must be a nurse, occupational health and safety professional or infection prevention and control (IPAC) professional. The Club Facility Hygiene Officer shall consult with all necessary persons in handling these responsibilities, including, without limitation, the Club's Medical Director, Athletic Trainer(s), Equipment Manager(s), the Club's infectious disease consultant, arena cleaning personnel and security personnel.

The Club Facility Hygiene Officer shall receive "Player Access Personnel" status.

The responsibilities of the Hygiene Officer include, but are not limited to, the following:

- The Facility Hygiene Officer will conduct a facility tour with a Club Athletic Trainer, Team Physician and Club infectious disease consultant to review implementation of the Protocol prior to opening of Club facilities.

- Consulting with the Club's locally-retained infectious diseases expert to discuss and resolve issues pertaining to the implementation of the Off-Season Training protocol at the Club's facilities, such consultation to include a walk-through of the facilities.
- Communicating basic hygiene measures (hand washing and/or hand sanitizing, coughing and sneezing hygiene, social distancing) in accordance with the guidance established by the CDC, Health Canada and the local health authorities in the Club's home city.
- Ensuring compliance with the cleaning and disinfecting requirements set forth in this document and the attachments hereto including instruction of facility cleaning personnel in respect of such requirements.

The Club Facility Hygiene Officer shall provide all Club personnel with a color-coded badge, to be worn at all times while at the Club facility, which identifies, either:

- "Player Access": for persons who are permitted to interact in close contact with the Players or others with a "Player Access" badge; or
- "No Player Access": for persons who are not permitted to interact in close contact with Players or others wearing a "Player Access" badge.

Each Club shall provide the NHL and the NHLPA and its designated Club personnel with a categorized list of Club Staff Permitted Personnel setting forth the names, roles and whether they are "Player Access" or "No Player Access," as soon as reasonably possible upon notice that the Club's facility will be open. Each Club must develop a security protocol to ensure that only people on this list can be granted access to the Club facility, and that no other persons be permitted access.

Each Club shall notify the NHL and the NHLPA, as soon as reasonably possible, of the identity and contact information for its Club Facility Hygiene Officer and its infectious disease expert, if the individual is different from the initial Club Facility Hygiene Officer used in conjunction with the 2019/20 Return to Play plan.

The Club Facility Hygiene Officer shall, by no later than the first day of the commencement of Off-Season Training and, thereafter, on a weekly basis, prepare a report certifying that each of the requirements set out in this Protocol has been satisfied and that the Club is in compliance with such requirements. A form will be prepared by the League for this purpose. The Club Facility Hygiene Officer shall provide additional reports detailing the circumstances of any non-compliance with these requirements immediately. A copy of the reports shall be provided to the League and to the NHLPA. All reports must be signed by the Club Facility Hygiene Office.

Adherence to the provisions in this Protocol and a level playing field will be important during Off-Season Training, most importantly, as the health and safety of Players and Club personnel is the League's top priority and also to maintain the integrity of competition among the Clubs. This Protocol sets forth a layered approach: no one aspect can stand on its own. Established violations of, and/or lack of compliance with, the Off-Season Training Protocol, will result in significant Club penalties, including fines, loss of draft choices, and/or ineligibility for participation in Off-Season Training activities.

Concerns regarding compliance with the Off-Season Training requirements shall be reported to the Club's Facility Hygiene Officer, and may also be reported to Bill Daly or Julie Grand. Players may also report their concerns regarding compliance to their NHLPA Divisional Player Representative.

It is recognized that a “one size fits all” solution may not be practical in all situations. If you believe that you can meet the goals and functions of this Protocol in a different manner, you may contact Bill Daly or Julie Grand at the League, who will consult with the NHLPA and medical consultants to consider whether an exception for a specific item herein, and approval of an alternative, is appropriate or permitted under the circumstances. Requests for an exemption to, or variation from, any provisions in this Protocol that you believe are unreasonable or impracticable shall be directed to Bill Daly or Julie Grand at the League, who will consult with the NHLPA. In the absence of prior approval from the League, Clubs shall not deviate from the requirements from this Protocol.