Screening and Tracking Template for Special Olympics Activities

Version: June 5, 2020

This template is provided as a way to screen and track participants during Special Olympics Events. If staff/volunteer/ coach have access to tablets or wifi, this could also be converted to a web form that is completed online by staff/volunteer/ coach at the practice/event.

REMINDERS:

- All participants to be reminded that they MUST stay home, if they are sick or showing signs and symptoms of COVID-19 or have been exposed to someone who has had COVID-19. They should be encouraged to contact their healthcare provider if they are feeling unwell.
- Before the start of any Special Olympics event/practice/training/competition (during Phases 1 and 2), a screening of all participants must be conducted to assess if anyone is showing signs or symptoms of COVID-19. All participants at an event, training, or practice, must be documented in case someone in attendance is diagnosed with COVID-19 and contract tracing is needed.

SCREENING PROTOCOL:

1. Must set-up a space for screening that maintains physical distance (6ft/2m) during screening.
2. Must ask the following questions (reinforced through visuals and verbally, such as a poster/paper with icons):
    a. In the last 14 days, have you had contact with someone who has been sick with COVID-19?
    b. Have you had a fever in the last week (temperature of 100.4°F/37.8°C or higher)?
    c. Do you have a cough and/or difficulty breathing?
    d. Do you have any other signs or symptoms of COVID-19 (fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea)?

3. Should conduct onsite measurement of temperature using thermometer (preferred non-touch thermal scanning thermometer if possible).
    - Fever equals temperature of 100.4°F/37.8°C or higher.
    - If high, may re-test after 5 minutes to ensure temperature is accurate.

4. Must record all names, results and contact information and keep in case needed for contact tracing or reporting (*Template available in supplemental materials*).
    a. If yes to any questions, participants MUST be isolated from the group (at minimum, kept 2m/6ft apart from others and with mask on), be sent home, and instructed to contact their healthcare provider for evaluation.
    b. Participants who are found to have COVID-19 symptoms must wait 10 days after symptoms resolve to return to activity OR must provide written proof of physician clearance to Special Olympics to return earlier.
    c. Participants who test positive for/have COVID-19 must provide written medical clearance before returning to sport and fitness activities.

Throughout the event/practice/training/competition remind participants of infection prevention protocols (e.g. facemasks, physical distancing, hygiene, and disinfection/sanitation). Sample signage and reminders available.

Name of Event: _____ **Date of Event/Practice:** _____ **Location:** _____

Participant Name	Participant Type (Athlete, Unified Partner, coach, HOD, etc.)	Contact Info:	Code of Conduct Signed	Please answer the following screeing questions. If yes to any questions, participants MUST be isolated from the group (at minimum, kept 2m/6ft apart from others and with mask on), be sent home, and instructed to contact their healthcare provider for evaluation	Recorded Temp:
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