

Screening and Tracking Template for Special Olympics New Jersey Activities

Version: October 22, 2020

Special Olympics
New Jersey



This template is provided as a way to screen and track participants during Special Olympics New Jersey 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 New Jersey 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 contact 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 given on the COVID-19 Screening Questionnaire (reinforced through visuals and verbally, such as paper/poster with icons):
 - a. Do you have a fever of 100.4 F or above?
 - b. Do you have any COVID-19 symptoms (cough, shortness of breath or difficulty breathing, chills, muscle pain, sore throat, new loss of taste or smell, nausea, vomiting, or diarrhea)?
 - c. Have you had close contact with someone diagnosed with COVID-19 or been notified that you may have been exposed to it?
 - d. Have you traveled to states with a significant spread of COVID-19 in the past 14 days? (See <https://bit.ly/2OHwsqR> for list of states with travel advisory)
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 New Jersey 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.



COVID-19 Screening Questionnaire

This questionnaire is required prior to attending any in-person Special Olympics New Jersey activity. If any questions are answered with a "yes" they are unable to participate.

Take the athlete's temperature

Do they have a Fever of 100.4 F or above?

YES / NO

COVID-19 Symptoms

Do they have any of these symptoms?

YES / NO

- Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Muscle pain
 - Sore throat
 - New loss of taste or smell
 - Nausea, vomiting, or diarrhea
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Have they had close contact (within 6 feet for 15 minutes or longer) with someone diagnosed with COVID-19 or been notified that you may have been exposed to it?

YES / NO

Have they traveled to states with a significant spread of COVID-19 in the past 14 days?

YES / NO

States with a positive COVID-19 test rate higher than 10 per 100,000 residents over a 7-day rolling average or a state with a 10% or higher positivity rate over a 7-day rolling average.

List of current states whose travelers are advised to quarantine upon arrival please scan or visit: <https://bit.ly/2OHwsqR>

