

REMINDERS:

• All participants should 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, all participants will be asked a series of questions 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.

DISCLAIMER:

This Attendance Protocol and Tracker is provided by Special Olympics Canada for informational and general guidance purposes only. It is intended to assist Chapters in developing their own policies and procedures. It is the responsibility of Chapters to ensure that their policies and procedures comply with current public health guidelines as well as all provincial, territorial and municipal guidelines and legal requirements. While Special Olympics Canada has endeavoured to provide the most up-to-date guidance, this document cannot be exhaustive, nor is it meant to be taken as either medical or legal advice.

ATTENDANCE PROTOCOL:

1. Programs should designate a location to complete the attendance protocol that maintains physical distancing (6ft/2m). Programs should designate who will be asking the questions/taking attendance at each session. If an athlete is unable to answer the questions below themselves then they will need to have a family member/caregiver/support worker there at the beginning to help with this.

2. Coach, volunteer or designate must ask the following questions (reinforced through visuals and verbally, such as the infographics from the SOPEI office):

- a. Do you have COVID-19?
- b. Are you experiencing any known symptoms of COVID-19, such as fever, cough, shortness of breath or feeling unwell?
- c. Have you travelled outside of Canada during the past 8 days?

d. Have you, in the past 8 days, knowingly come into contact with someone who has COVID-19, who has known symptoms of COVID-19, or is selfquarantining after returning to Prince Edward Island?

e. Have you been following government recommended guidelines for COVID-19 including practicing physical distancing?

3. Coach, volunteer or designate must record all names, results and contact information and keep in case needed for contact tracing or reporting.

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 the Special Olympics Prince Edward Island office 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).

**Note: Signed Declaration and Waiver forms need to be received from each participant prior to them participating in their first sport/program. Participants will only need to sign the waiver form once but will need to submit a signed declaration form prior to the start of each program they are in. Participants will be required to go through the SOC attendance protocol at each program, training session, event, etc. they attend. July 20, 2021

Special Olympics Prince Edward Island Attendance Tracker

Name of Event/Program:	Date of Event/Program:			Location:	
Participant First and Last Name	Participant Type (Athlete, Coach, Volunteer, Staff, 1-on-1 Support)	Best Contact Phone Number &/or Email	Protocol Questions Asked (Y/N)	COVID-19 Signs or Symptoms (Y/N)	Notes
Declaration and Waiver forms need to be received prior to the participant's first sport/program. Once received you can mark these columns as N/A.					

Signature of Individual(s) who completed attendance protocol and tracker

Printed Name: ______ Signature: ______

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