## **Prevention Strategies Implemented**

School District or Name: Click or tap here to enter text. C C H S

Current as of: Click or tap here to enter text.(mm/dd/yy) 8-14-21

Prevention Strategy	Status	Additional Notes or Explanation	
Public Posting of COVID Case	Always	Click or tap here to enter text.	
Counts in Schools	☐ Sometimes		
(required by order)	☐ Not at this time		
Public Posting of COVID	<b>★</b> Always	Click or tap here to enter text.	
Prevention Strategy School Form	☐ Sometimes		
(required by order)	☐ Not at this time		
Isolation of COVID-19 Cases	Always	Click or tap here to enter text.	
(required by order)	☐ Sometimes		
	☐ Not at this time		
Quarantine of Outbreak and	■ Always	Click or tap here to enter text.	
Household Close Contacts	☐ Sometimes		
(required by order)	☐ Not at this time		
Quarantine of All Close Contacts	☑ Always	Click or tap here to enter text.	
	☐ Sometimes		
	☐ Not at this time		
Contact Tracing	■ Always	Click or tap here to enter text.	
(required by order)	☐ Sometimes		
	☐ Not at this time		
Notification of Close Contacts	★ Always	Click or tap here to enter text.	
(required by order)	☐ Sometimes		
	☐ Not at this time		
Indicate Level of Screening Testing for Participants or Members of the Following Groups:			
Teachers and staff who	☐ Always	Click or tap here to enter text.	
are not fully vaccinated	☐ Sometimes		
	■ Not at this time		
Students who are not	☐ Always	Click or tap here to enter text.	
fully vaccinated	☐ Sometimes		
	■ Not at this time		
High-risk sports <sup>1</sup> and	☐ Always	Click or tap here to enter text.	
extracurricular activities	☐ Sometimes		
for those who are not	Not at this time		
fully vaccinated			
Low- and intermediate-	☐ Always	Click or tap here to enter text.	
risk sports <sup>1</sup> for those who	☐ Sometimes		
are not fully vaccinated	Not at this time		
Promoting Vaccination	☐ Always	Click or tap here to enter text.	
	☐ Sometimes		
	■ Not at this time		

 $<sup>^{1}\,\</sup>underline{\text{https://ncaaorg.s3.amazonaws.com/ssi/COVID/SSI}}\,\,Resocialization Developing Standards Second Edition.pdf$ 

Wearing Masks Consistently and	☐ Always	Click or tap here to enter text.
Correctly Over the Nose and	☐ Sometimes	
Mouth	Not at this time	
Which of the Following Settings or A	ctivities Require the Wea	ring of Face Masks over the Nose and Mouth:
In indoor school classrooms	☐ Yes 🗷 No	Click or tap here to enter text.
In school hallways	☐ Yes 🔀 No	Click or tap here to enter text.
In outdoor learning	☐ Yes 🗷 No	Click or tap here to enter text.
environments		
During outdoor recess	☐ Yes 🗷 No	Click or tap here to enter text.
During assemblies and large	☐ Yes <b>五</b> No	Click or tap here to enter text.
gatherings		
During meals	☐ Yes 🗷 No	Click or tap here to enter text.
During close contact sports	☐ Yes 🙀 No	Click or tap here to enter text.
During indoor sports	☐ Yes 🔁 No	Click or tap here to enter text.
During outdoor sports	☐ Yes 🗷 No	Click or tap here to enter text.
During indoor non-athletic	☐ Yes 🗷 No	Click or tap here to enter text.
extracurricular activities		
During outdoor non-athletic	☐ Yes 📱 No	Click or tap here to enter text.
extracurricular activities		
On school bussing	☐ Yes ☐ No	Click or tap here to enter text.
(required by order)	NIA	
Physical Distancing	☐ At least 6 feet	Click or tap here to enter text.
	X At least 3 feet	
	☐ Less than 3 feet	
Distancing during food service	☐ Always	Click or tap here to enter text.
and meals	☐ Sometimes	
	■ Not at this time	
Cohorting – please describe	☐ Always	Click or tap here to enter text.
	☐ Sometimes	,
	✓ Not at this time	
Accommodations provided to	<b>X</b> Always	Click or tap here to enter text.
those with disabilities or Other	☐ Sometimes	,
health care needs	☐ Not at this time	
Handwashing & Respiratory	<b>∡</b> Always	Click or tap here to enter text.
Etiquette	☐ Sometimes	
•	☐ Not at this time	
Cleaning and Disinfection	■ Always	Click or tap here to enter text.
	☐ Sometimes	oner of the field to office. Earth
	☐ Not at this time	
Improving Ventilation	■ Always	Click or tap here to enter text.
improving vertiliation	☐ Sometimes	Greek of cup freez to critical text.
	L Jonicumes	
	☐ Not at this time	
Exclusion of III	☐ Not at this time	Click or tan here to enter text
Exclusion of III (stay home when sick)	X Always	Click or tap here to enter text.
Exclusion of III (stay home when sick)	<ul><li>✓ Always</li><li>☐ Sometimes</li></ul>	Click or tap here to enter text.
(stay home when sick)	<ul><li>✓ Always</li><li>☐ Sometimes</li><li>☐ Not at this time</li></ul>	
	M Always ☐ Sometimes ☐ Not at this time M Always	Click or tap here to enter text.  Click or tap here to enter text.
(stay home when sick)	<ul><li>✓ Always</li><li>☐ Sometimes</li><li>☐ Not at this time</li></ul>	