

Risk Assessment Questionnaire (1)

Special Olympics Ontario - Return to Sport Risk Assessment Questionnaire This form must be submitted by the Head Coach / Team Manager or Program Leader for a Sport Team / Club or Program supported by a Special Olympics Ontario Program Consultant.

- Risk Assessment Questionnaire

This Risk Assessment Questionnaire will be used to determine the suitability for a club/team/program to proceed with the Return to Sport Process.

Please answer all questions truthfully and provide additional information to support your answers where needed.

This form is meant to assist you, the coach, in identifying areas that require further assistance for re-starting your program.

For the purpose of all Return to Sport Documentation, Participant refers to all of the following: Athlete, Coach, Volunteer, or Support Person.

- Contact Information

- PLEASE NOTE

The information in this section should be the name and contact information for the individual who will be the primary contact for Return to Play for your club. Typically this is the Head Coach or Team Manager.

Please ensure that the email and telephone number listed below are ones that are checked regularly and consistently.

- Program Contact*

Name of Person completing this Risk Assessment Form. (This should be the main contact for this program.)

First Last

- Program email*

Primary Contact email for the club/team/program

- Program Phone*

The Primary Contact Phone number for this club/team/program

- Program Name*

Please provide the name of your Club/Team/Program

- **Role***

For the purposes of this application what is your primary role?

- **Sport***

- **Community / Partner / Organization***

If you are a Special Olympics Community club please provide the name of your Special Olympics Community here.

If you are a program operating with a Partner in Play or Affiliated Organization please provide the organization or partner name here.

- **Training Venue Risk Assessment**

- **Owner of Training Facility:***

Please indicate who the training facility is owned/operated by.

- **Indoor Training:***

Please indicate if the training will be held indoors.

- **Public Access to Facility:***

Will the training take place in a venue/facility that is accessed by multiple groups?

- **Physical Distancing in Common Areas:***

Do common areas and equipment areas of the facility allow for physical distancing between participants (minimum 2 metres)?

- **Separation of Groups:***

Please describe how participants will be separated from other groups, to limit transmission of COVID-19?

- **Cleaning Schedule:***

Does the training facility have a cleaning schedule developed to ensure the venue and its equipment is clean and hygienic (wiping surfaces and any equipment regularly with disinfectant is strongly recommended before, during and between each training group)?

- **Garbage Containers:***

Will closed garbage containers be available for participants to dispose of all hygienic materials ie tissues, etc?

- **Changerooms:***

If changerroom facilities are available, does the facility have individual stalls / lockers for each participant?

- **Program Risk Assessment**

- **Health Districts of Participants:***

Will the group include participants attending from health districts that are currently in Phase 2 status from the provincial government?

- **High Risk Participants:***

Will the group include participants at higher risk of severe COVID-19 disease (ie. people over the age of 65 yrs of age or people with underlying health conditions)?

- **Spread Risk of Sport:***

Is the sport considered at higher risk for spread for COVID-19 (ie. contact sport, indirect contact through training equipment, ie balls, etc)

- **Limiting the Spread:***

What measures will be in place to limit the sharing of equipment, water bottles, etc ?

- **Participants Transportation:***

Do participants typically carpool or take public transit to attend the training sessions?

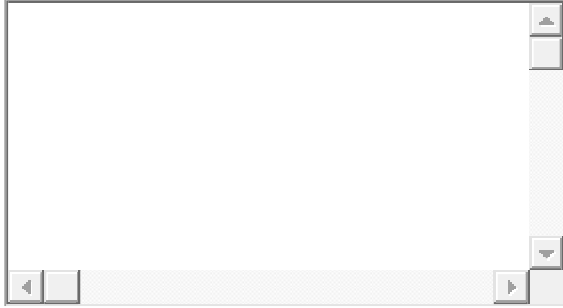
- **COVID - 19 Knowledge Base**

- **Acknowledgement of COVID Facts:***

Do you understand the risks and transmission routes of COVID-19, the steps that participants can take to limit spread, the recognized best-practices (including respiratory etiquette, hand hygiene, physical distancing, etc)?

- **Training Plan:***

What specific plans will you implement to enhance the understanding, among your participants, to prevent the spread of COVID-19 .



- **Health and Safety**

- **Face Coverings:***

Face coverings are now mandated in numerous communities across the province. Will participants be expected to wear face coverings during the training sessions to limit the spread of the virus?

- **Updated EAP:***

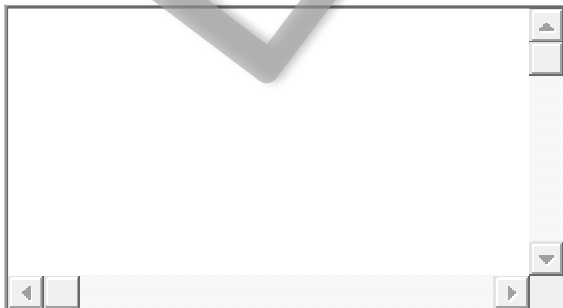
Have you updated your Emergency Action Plan to include precautions for COVID-19? (EAP must include use of PPE, emergency phone numbers, location information, outline of emergency entrances, including outdoor sport venues, etc.)

- **Community COVID-19 Response Plan:***

Do you understand the COVID-19 Response Plan within your community? In the event a participant exhibits symptoms of COVID-19 or has tested positive for COVID-19, what is the medical response plan.

- **Distribution of Response Plan:***

Please describe how you will distribute the COVID-19 Response Plan to your participants.



- **Declaration**

- **Agreement**

It is my understanding that the information presented above to be true and accurate. I understand that providing false information regarding the statements above could result in disciplinary action against me which could include suspension from Special Olympics Ontario.

I have provided information that is true and accurate.

- **Signature**



- **Date**

Date Format: MM slash DD slash YYYY

[Save and Continue Later](#)

EXAMPLE