

Activity/Event COVID Risk Assessment

Section I: Event Overview

Name of the Event	Date of Event	Time of Event
Name of Group Hosting Event	Event POC	Location of Event

Event Description:

Section II: Event Details

Audience	Squadron
Families invited?	No
Off Base Non-Mil invited?	No
Estimated Event Size	
Food and/or alcohol Being Served?	No-Skip to Section III

Additional Details and Notes:

Section III: Food Details

POC for Food Service Activities:	
Type of Food Served?:	
Servers Trained in food handling?	
Disposable Gloves Available?	

Additional Details and Notes:

Section IV: Protective Actions Being Implemented

Protective Measures Lead:		Hand Sanitizer Available:	Yes-Provided
Social Distance measures:	<input type="checkbox"/>	Masks Available:	Member Provided
Mandatory mask wear:	<input type="checkbox"/>	Disposable Gloves Available:	
Cleaning protocols in place:	<input type="checkbox"/>	Disinfectant Available:	
Roster for potential tracing:	<input type="checkbox"/>	Question screener available:	Yes

Additional Details and Notes:
Roster & sign in sheet at entry.

Section V: Review

Office	Name, Rank Duty Title	Signature	Comments
Supervisor			
Unit CC (if required)			
Public Health (if required)			
Judge Advocate (if required)			
Group Coord (if required)			
Wing Coord (if required)			

Notes:

Activity/Event COVID Risk Assessment Instructions

The intent of this assessment is to assist organizers and planners prepare in the safest way for their activity/event. This is also a helpful tool at all levels to make a risk assessment and prepare mitigating protocols to minimize the risk of COVID-19 transmission. There is helpful guidance available in the following documents/websites:

27 SOW COVID 19 Guidance Order Update #11 (Or Most Current)

- <https://cv.nmhealth.org/public-health-orders-and-executive-orders/>
- <https://www.cdc.gov/coronavirus/2019-ncov/downloads/community/COVID19-events-gatherings-readiness-and-planning-tool.pdf>

Section I:

Enter the applicable data for your event. If you don't have a solid time or date please put TBD. If the final POC is unknown the name of the requester will be sufficient.

Section II:

This section is so that Public Health has an idea of the size and scope of the event if contact tracing will have to be done due to COVID positive case of an attendee.

Section III:

Only applicable if there will be food at the event.

Section IV:

The Protective Measures Lead (PML) will ensure that health protocols outlined by the CDC, local/state measures and as described in this section are in place during the event. The PML may want to consider creating a team to assist depending on size of gathering. Recommend a sign or person asking the following questions at sign in or entrance to event:

- Are you having any symptoms concerning for COVID-19 (i.e. cough, SOB, fever, sore throat, chills, diarrhea, loss of taste/smell, etc.)
- Have you tested positive for COVID-19 in the last 14 days
- Have you been in close contact to someone diagnosed with COVID-19 in the last 14 days

Section V:

Sq/CC (or equivalent) review for squadron level events

Group/CC (or equivalent) review for multi-squadron event

Wing/CC review for multi-group event

Installation/CC approval for base wide events (except for MWR/FSS Sponsored Functions which can be approved by the MSG/CC)

~~NOTES:~~

~~Public Health Office (PHO) and Judge Advocate (JA) Offices assistance should be sought by any reviewer if the health guidance and policies are unclear to the reviewer.~~

~~PHO and JA review should be sought for any gatherings over 300.~~

~~PHO review should be sought if food is involved with the exception of pre-packaged food, food that is brought to the event and not shared with other attendees (i.e. bring your own lunch), and food that is served/catered from on-base establishments.~~