Event Template: COVID-19 Control Plan

This COVID-19 Control Plan Event Template is designed to address common issues for events and other venues of assembly to reduce the risk of spreading COVID-19. An establishment may fill out this template to fulfill the requirement that it complete a COVID-19 Control Plan. If you have questions, please ask them by emailing: planquestions@reopeningri.com. Any venue of assembly, event, or activity with a designated start/end time or times (or having limited duration) must not exceed 125 people for indoor settings and 250 people for outdoor settings, municipalities or state agencies may request to review and/or approve plans for venues of assembly, events, or activities subject to the 125- or 250-person cap with capacities greater than 100 people as part of local or state agency approval processes. Please note that social gatherings (e.g. parties, receptions, networking events) are limited to no more than 25 people indoors or 50 people outdoors with the exception of social gatherings in restaurants or where licensed caterers follow the restaurant guidelines, in which case they may not exceed 50 people indoors or 100 people outdoors.

Event	Information			
Name (of Event:	Date & Time of Event:		
Event Organizer/Manager:		Venue/Location:		
/enue/	/Location Address:	Venue/Location Owner/Manager:		
/enue/	/Location Email:	Venue/Location Phone:		
Event Organizer:		Event Organizer Contact Name:		
Event Organizer Email:		Event Organizer Contact Phone:		
Event o	description:			
What s	ed number of people attending: etting-specific guidance(s) apply to this event v.reopeningri.com)	(and do you plan to follow)? (All guidance can be found		
	Outdoor Retail			
	Retail			
	Restaurants (e.g. for food and beverage oper	ations)		
	Recreational, Historical, Cultural, and Enterta	inment Establishments		
	Youth and Adult Sports (e.g. for tournaments			
	Other (please specify):			
Staffing, volunteers, vendors, and other providers. Which staff, volunteers, vendors, service providers, or others will be on-site (e.g. sanitation companies, staffing agencies, etc)?				

What measures will the event undertake to ensure vendors and third-parties follow applicable guidelines?

Included requirements in vendor and other third-party contracts that their staff will follow COVID-19 guidelines and regulations.





	Reviewed COVID-19 Cor	ntrol Plans of vend	ors and other third-p	arties (e.g. serv	ice providers).	
	Restricted access to deliveries and other staff.					
	Other:					
Event	-		Alan Falloviča vo			
	e attach a map of your eve	ent area and label	the following:			
	Entrances and exits		7. Vendors			
	High-traffic areas		8. Food/beverage/restaurant areas9. Seating areas			
	Lines/queues Handwashing and hand	sanitizer stations		_	ertainment areas	
	Buildings	Samuzor Stations	11. Res		or tall illione areas	
	Tents		12. Pote	ential bottlenecl	KS	
Physi	cal distancing and org	ganizing person	nel and event/ve	nue layout		
please note individual spaces within the venue/area (if applicable). Please use the table below to list each space within the venue/area, its size, its capacity limit, and the number of attendees expected. Capacity limits can be calculated using 1 person per 100 square feet for unstructured settings or areas of general circulation. Capacity of seated or structured areas is determined by the ability to maintain 6-foot spacing between parties (or up to 66 percent of normal seating capacity, if applicable). Please note that the 6-foot distancing requirement may be more restrictive than the 66 percent rule; the 6-foot spacing requirement therefore should be considered first as you begin planning for reopening.						
	Description of Space	Indoor/Outdoor	Size of Space	Capacity of	Number of	
	n the Overall e/Area (e.g. ballroom A)	Space	(e.g. in square feet)	Space (in compliance with COVID guidelines)	Attendees Expected	
that th distan	nce process, capacity and ne above capacity limits and ne while entering the ever ations, allowing entrance	re maintained and nt area. Examples	the processes you vote of best practices income	vill use for maint clude issuing tin	taining physical	
	Designating staff to mo	nitor for capacity a	it key spaces (e.g. er	trances and exi	ts)	
	Modifying advertising pr	ractices (e.g. limiti	ng advertising); Requ	uiring reservatio	ns in advance	
	Issuing tickets for desig	nated time blocks				
	Implementing measures to form outside of entra		l 6-foot physical dista	ancing demarca	tions) to allow queues	
	Conducting event rehea	rsal/walk-through	to identify unanticip	ated bottleneck	s or high-traffic areas	
	Modifying hours as follo		·			





	Other:
distan	ing physical distancing. Please indicate and describe below how the event will facilitate physical ucing (e.g. 6-foot spacing, one-way customer flows, signage, designated staff) among event attendees, ing in high traffic areas (e.g. entrance and exit points, lines for vendors).
	Designating staff to monitor for physical distancing at key spaces (e.g. lines, identified bottlenecks
	Designating one-way customer flows
	Designating six-foot distancing (e.g. using signs, stanchions, chalk, tape, or other means) in queues and other spaces where distancing will be hard to maintain.
	Allowing for additional space
	Moving or rearranging furniture or stations
	Moving or rearranging furniture or stations Please provide additional details here:
	Please provide additional details here:
Minir	Please provide additional details here: mizing access by COVID-19-positive or symptomatic individuals Communicate with employees, volunteers, vendors, service providers, and attendees about the nee to stay home if they test positive for, have been exposed to, or have symptoms of COVID-19. (Please
Minir	Please provide additional details here:
Minir	Please provide additional details here: mizing access by COVID-19-positive or symptomatic individuals Communicate with employees, volunteers, vendors, service providers, and attendees about the nee to stay home if they test positive for, have been exposed to, or have symptoms of COVID-19. (Please retain a copy of this communication or communications.) Established screenings can be conducted verbally, by app, by phone, or by another method of the venue or organizer's choosing including, if necessary, the posting of an informational poster that communicates the screening requirements. Describe your screening process and the communications that have been or will be issued instructing them to stay home if they test positive

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To ensure compliance with face covering requirements, you have (check the boxes to certify):

Informed event staff, volunteers, vendors, and attendees of the requirement to wear face masks or cloth face coverings unless one can easily, continuously, and measurably maintain at least six (6) feet of distance from others for the duration of his or her work and/or time on premises.





	Procured cloth masks (or surgical masks) for all employees (and volunteers).
	Distributed cloth face masks (or procedure masks) to all employees (including volunteers) who need one at no cost and have a plan to distribute additional face masks as the need arises (e.g. in the event of loss or damage).
	Established a protocol or process for requiring mask wearing among event staff, volunteers, and attendees:
	Implemented other procedures. Please describe them here (and attach extra pages if needed):
Prepa	aring for and responding to a positive case or outbreak
To ens	sure proper management of a positive COVID-19 case or outbreak, you have (check the boxes to
	Developed a plan to retain contact information (name, phone number, time onsite) of employees, volunteers, third-parties, vendors, and attendees for the purposes of contact tracing.
	Agreed to call the Rhode Island Department of Health (RIDOH) immediately upon being informed of a positive case amongst your employees, volunteers, third-parties, vendors, or attendees at 401-222-8022, or 211 after hours, so they can assist in contact tracing and provide further instruction.
	Developed a COVID-19 sick policy and communicated it to employees, volunteers, third-parties, vendors, and attendees. (Please retain a copy of this communication or communications.)
	Assigned a minimum of one representative to work with RIDOH on testing, contact tracing, case investigation, isolation and quarantine, and any other follow-up related to outbreak containment. Please identify that representative here and update this information on this form if it changes:
	Planned to minimize/isolate the number of people interacting with one another at the event in order to reduce the number of people who would be required to quarantine in the event of a positive case.
	 Created timed shifts where employees, volunteers, third-parties, vendors, and attendees do not overlap
	 Segregated employees, volunteers, third-parties, vendors, and attendees into "pods" by space/zone or shift to reduce the number of people who interact with one another.
	Please provide additional details here:
	Prepared your company to respond to a positive case or outbreak in the workplace by, for example:
	 Reviewing the general business guidelines with personnel and agreeing to call RIDOH in the case of an outbreak or positive case.





		Ensuring sick policies accommodate any required quarantine/isolation of the personnel "team" or "pod" in which a positive case is located.
		Closing a portion or entirety of the workspace for a thorough cleaning.
		Describe your plan for identifying and managing employees, volunteers, third-parties, vendors, and attendees, including those in a "team" or "pod," if or when someone tests positive for COVID-19 (and attach extra pages if needed):
		Implementing other procedures (attach extra pages if needed):
Hand	washir	ng & Hand Sanitizer
To ens	ure pro	per cleaning and decontamination of the workspace, you have (check the boxes to certify):
	throug	cted workers to wash their hands for at least 20 seconds with soap and water frequently hout the day, but especially at the beginning and end of their shift, prior to any mealtimes, leaning, after removing gloves (where applicable), and after using the restroom.
	vendo alcoho	hand-washing facilities with soap and running water available to employees, volunteers, rs, attendees, visitors, or customers, or will be providing hand sanitizer (with at least 60% of content) that can be used for hand hygiene in place of soap and water. (Sanitizer is an option hands are not visibly soiled.)
	Develo neede	oped procedures for monitoring the supply of soap and/or hand sanitizer and replenishing it as d.
Clean	ing an	d decontamination
To ens	ure pro	per cleaning and decontamination of the workspace, you have (check the boxes to certify):
	Made	a plan to sanitize commonly touched surfaces and areas frequently.
	•	ed of vendors (e.g. in their contracts) and other third parties to sanitize all high-touch surfaces pared objects frequently.
	addition Prever	a plan for or arranged for cleaning of the establishment/venue at least once per day. In on, made a plan to comply with RIDOH regulations and Centers for Disease Control and attion (CDC) guidelines. Please describe your plan for such cleaning here (and attach extra if needed):
	equipr	nented new procedures to ensure cleaning and disinfecting of work surfaces, including nent, tools and machinery, delivery vehicles and areas in the work environment, including oms, break rooms, lunch rooms, meeting rooms, and drop-off and pick-up locations in





	compliance with CDC guidelines. Please describe your procedures here (and attach extra pages if needed):
	Implemented other procedures. Please describe them here (and attach extra pages if needed):
Comr	nunication with employees, volunteers, attendees, and vendors
	ke sure you, your employees, and other participants have a shared understanding of how to operate Rhode Island's phased reopening, you have (check the boxes to certify):
	Shared information with your employees, volunteers, attendees, vendors, and other third parties to remind them of the requirement to stay home if they are sick and inform them of sick-time policies.
	Posted signs or posters describing the rules for wearing of masks, physical distancing of six feet between parties, and specifying, at the entrance of facilities, that sick individuals should stay home.
	Determined the steps you will take upon learning of an employee, volunteer, attendee, vendor, or other third party who has tested positive for COVID-19, including how you will work with RIDOH to identify which individuals will need to be quarantined and how you will communicate this information to other employees, volunteers, attendees, or vendors while respecting health privacy laws.
	Communicated this information to employees, volunteers, attendees, vendors, and other third parties in their preferred language or easiest mode of communication. (Please retain a copy of this communication or communications.)
	Discussed with or distributed information to employees and other participants about how the company will address employee concerns. (Please retain a copy of this communication or communications.)
	Implemented other procedures. (Please describe them.)
•	ng up to date on guidance ure that you stay up to date on the guidance that is being issued by the State both in general and
regard	ing events, venues, or related business settings, you will (check the boxes to certify):
	Consult http://www.reopeningri.com/ , the RIDOH website, and Governor's Executive Orders on a weekly basis or whenever notified of the availability of new guidance.
	Stay in touch with industry association(s) or chamber(s) of commerce regarding your industry's guidance or pledge pertaining to business operations. Please fill in the name of at least one industry association or regional RI chamber of commerce:
	If you have questions regarding your local industry associations or chambers of commerce, please email: planquestions@reopeningri.com .



