

## Prevention Strategies Implemented

School District or Name: William C. Abney Academy

Current as of: 08/26/21(mm/dd/yy)

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

<sup>1</sup> [https://ncaaorg.s3.amazonaws.com/ssi/COVID/SSI\\_ResocializationDevelopingStandardsSecondEdition.pdf](https://ncaaorg.s3.amazonaws.com/ssi/COVID/SSI_ResocializationDevelopingStandardsSecondEdition.pdf)

Wearing Masks Consistently and Correctly Over the Nose and Mouth	<input checked="" type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	Click or tap here to enter text.
<i>Which of the Following Settings or Activities Require the Wearing of Face Masks over the Nose and Mouth:</i>		
In indoor school classrooms	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Click or tap here to enter text.
In school hallways	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Click or tap here to enter text.
In outdoor learning environments	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Click or tap here to enter text.
During outdoor recess	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Click or tap here to enter text.
During assemblies and large gatherings	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	The school population is divided into cohorts and no indoor large group gatherings take place.
During meals	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Click or tap here to enter text.
During close contact sports	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Yes, while indoors
During indoor sports	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Click or tap here to enter text.
During outdoor sports	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Click or tap here to enter text.
During indoor non-athletic extracurricular activities	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Click or tap here to enter text.
During outdoor non-athletic extracurricular activities	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Click or tap here to enter text.
On school bussing (required by order)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Click or tap here to enter text.
Physical Distancing	<input type="checkbox"/> At least 6 feet <input checked="" type="checkbox"/> At least 3 feet <input type="checkbox"/> Less than 3 feet	Click or tap here to enter text.
Distancing during food service and meals	<input type="checkbox"/> Always <input checked="" type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	Groups eat by cohorts to minimize and/or eliminate spread across cohort groups.
Cohorting – <i>please describe</i>	<input checked="" type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	With the exception of school transportation to and from school, all students are assigned to cohorts within the school to minimize and/or eliminate spread of the virus across cohorts.
Accommodations provided to those with disabilities or Other health care needs	<input checked="" type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	Click or tap here to enter text.
Handwashing & Respiratory Etiquette	<input checked="" type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	Click or tap here to enter text.
Cleaning and Disinfection	<input checked="" type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	Click or tap here to enter text.
Improving Ventilation	<input type="checkbox"/> Always <input checked="" type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	Click or tap here to enter text.
Exclusion of Ill (stay home when sick)	<input checked="" type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	Click or tap here to enter text.
Visitor Restrictions	<input checked="" type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Not at this time	Access to our building is restricted to essential visitors only, such as maintenance contractors and educational consultants.

**Revision History:**

<b>Date</b>	<b>Revisions</b>
Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.