

**Cycling Ireland**

**COVID-19**

**Event Organisers Checklist**

The following checklist provides some basic considerations when organising an event in the COVID-19 Environment.

It is strongly recommended that anyone organising or attending a cycling activity complete the following e-learning COVID-19 Course developed by Sport Ireland –

<https://www.sportireland.ie/covid19/course>

We note that this is an evolving situation and timelines on restrictions may result in different requirements at various times. Ultimately, public health guidelines will govern any resumption of cycling activities.

### Pre-Event

- Organisers should discuss with the venue owner or authority (road) at the earliest possible opportunity to understand any additional restrictions that they may have in place.
- When assessing your event, it is critical that you understand the status of COVID-19 at Government and Local Council level.
- Set-Up Pre-Event Registration Process: Ensure that all participants are aware that their contact information may be made available to the government/HSE in the event of a positive COVID-19 case from one of the participants.
- Develop a non-contact number process.
- Develop a start list that ensures the total number of people onsite does not exceed government guidelines.
- Consider signage providing information on:
  - Physical Distancing Guidelines [LINK](#)
  - COVID-19 Symptoms
  - Physical Distancing Markings
  - Venue Specific Movements
  - Hygiene Guidelines
  - Medical Locations and Protocol
- Develop a clear and flexible refund policy.
- Develop a medical plan that considers the implications of COVID-19

**Communications**

- Develop a Participant Communications Plan that outlines any special conditions or new ways of operating.
- Remind participants that they are not to attend if they have had any illness or symptoms of COVID-19. Participants must not attend if in the last 14 days they have been unwell or had close contact with a known or suspected case of COVID-19 (cough, sore throat, fever, shortness of breath, etc), even if mild. Participants must leave immediately if they demonstrate any symptoms of COVID-19 during the event.
- Conduct an online briefing with all officials and volunteers on the requirements outlining any specific practices.
- Consider appointing a COVID-19 Liaison Officer for the event.

**At Event**

- Ensure there is a registration process that maintains physical distancing and hygiene requirements.
- Sanitising alcohol-based dispensers should be provided near the start and finish.
- Only essential personnel should be appointed to help conduct the event. Commissaires should be limited to the minimum number. Any other volunteers or officials should only be appointed for safety purposes.
- All non-essential equipment and surfaces are closed off (e.g. benches).
- Provide plenty of bins for riders to throw away their rubbish.
- Prizes, where applicable, should be made by bank transfer or posted.

## Self-Assessment Personal Screening Questionnaire

This is a self-assessment form for your personal use. If you answer YES to any of the questions below you should stay at home and DO NOT ATTEND ANY CYCLING ACTIVITIES and inform your medical practitioner if you have not already done so.

Date:

Name:

Contact details: (email/contact number)

- |   |        |
|---|--------|
| 1. Are you currently diagnosed with or believe you may have COVID-19?   | YES NO |
| 2. Have you had any of these symptoms of COVID-19 in the past 14 days <a href="#">LINK</a> ?                            | YES NO |
| → High temperature (fever)?   | YES NO |
| → A new continuous cough?   | YES NO |
| → New unexplained shortness of breath?  | YES NO |
| → Sneezing or runny nose?   | YES NO |
| → A sore throat?  | YES NO |
| → Loss of smell?  | YES NO |
| 3. Have you been in contact with a COVID-19 confirmed or suspect case in the previous 14 days?                          | YES NO |
| 4. Have you provided direct care for COVID-19 patients in the past 14 days?   | YES NO |
| 5. Have you visited or stayed in a closed environment with anyone with COVID-19 in the past 14 days?                    | YES NO |
| 6. Have you travelled together with COVID-19 patient in any kind of conveyance in the past 14 days?                     | YES NO |
| 7. Have you arrived in Ireland from another country in the last 14 days – this includes Irish citizens travelling home? | YES NO |