

SOCIAL DISTANCING COMMUNITY COMPLIANCE

Date: _____ **County or Community Name:** _____

Indicator	Applicable*		Estimated Compliance	Acceptability			Estimated Impact**			
	YES	NO		High	Med	Low	Small	Mod	Serious	Severe
Public event cancellation	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Schools Closure and Youth Compliance										
Daycare closure	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Public elementary school closure	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Public secondary school closure	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Private school closure	YES	NO		High	Med	Low	Small	Mod	Serious	Severe
College closure	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Business										
Non-essential retail closure	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Non-essential worksite closure	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Application of in-worksite social distancing	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Civic Organizations										
Social Organizations	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Churches	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Public										
Adults avoiding congregation	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Youth/children avoiding congregation	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Other	YES	NO	%	High	Med	Low	Small	Mod	Serious	Severe
Comments:										

*Is the policy in place? or does the site exist in the community? **Includes economic, social, mental health