

# Tall Oaks Camp and Conference Center

## 2021 Policy Guide to Prevent Spread of SARS-CoV-2 (COVID-19)

### Introduction

The goal of this Policy Guide is to provide educational materials for camp staff to reduce potential exposures to and spread of COVID-19. This information is consistent with the health and safety recommendations from the U.S. Centers for Disease Control and Prevention (CDC), in particular to assess if Tall Oaks should you consider opening, evaluate if the recommended health and safety actions are in place, and to assure that ongoing monitoring is in place.

According to the CDC, the more people a camper or staff member interacts with, and the longer that interaction, the higher the risk of COVID-19 spread.<sup>1</sup> The four relative risk levels provided by CDC include:

- *Lowest Risk: Small groups of campers stay together all day, each day. Campers remain at least 6 feet apart and do not share objects. Outdoor activities are prioritized. All campers are from the local geographic area (e.g., Metro KC area).*
- *More Risk: Campers mix between groups but remain at least 6 feet apart and do not share objects. Outdoor activities are prioritized. All campers are from the local geographic area (e.g., Metro KC area).*
- *Even More Risk: Campers mix between groups and do not remain spaced apart. All campers are from the local geographic area (e.g., Metro KC area).*
- *Highest Risk: Campers mix between groups and do not remain spaced apart. All campers are not from the local geographic area (e.g., Metro KC area).*

This Policy Guide will cover specific procedures and outline recommended best practices to insure that Tall Oaks campers, staff, families and our communities are not adversely impacted by unwanted spread of COVID-19 at Tall Oaks.

### COVID Coordinator

This policy guide should result in unified and cohesive education, implementation, and monitoring actions which will provide the safest possible camp experience for youth and families in the region. There is certainly, arguably now more than ever before, a need for youth engage in Camp activities and to experience fellowship, nature and fun.

There will need to be at least one qualified dedicated person from the medical or administrative staff who can act as the primary contact for campers, parents/legal guardians, and staff. This person will ideally be on site and available to groups at Tall Oaks on a daily basis. They should be prepared to effectively address any questions and concerns related to the COVID-19 pandemic, and have resources available for additional information. They should be familiar with:

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<sup>1</sup> Suggestions for Youth and Summer Camps <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/summer-camps.html>

- Medical matters relating to the novel Coronavirus SARS-CoV-2.
- Administrative, engineering, and personal protective equipment (PPE) controls the camp has implemented in response to the COVID-19 pandemic designed to reduce risk.
- Current events as they relate to the COVID-19 pandemic.
- Policies and procedures the camp has implemented related to the COVID-19 pandemic.
- Best practice: Designate a team consisting of both medical and administrative staff responsible for answering questions and concerns from campers, parents/legal guardians, and staff.
  - Be familiar with the CDC Readiness and Camp Planning Tool, and use it as a guide to make Tall Oaks as safe as possible.<sup>2</sup>

It will be important to discern who this person will be early on. Should it be the UCC Camp Administrator? Should it be someone from the DOC Region? In either case this person (or people) will have significant responsibilities before, during and even after the summer camping season. IN addition to the above mentioned planning tool, this person will need to be intimately familiar with the “Field Guide for Camps on Implementation of CDC Guidance” available on the American Camp Association website.<sup>3</sup>

## **Summary**

In summary, minimizing the spread of SARS-CoV-2 requires multiple strategies. Each requires specific actions. Additional actions may be taken by specific groups of workers or campers. Staff involved in food preparation for example will have specific procedures. Some campers with specific types of illnesses may require additional precautions and screening. The main strategies used to mitigate SARS-CoV2 will be:

- Education and communication - Website, social media, mailings
- Screening
  - before camp
  - upon arrival at camp
  - daily while at camp
  - post camp screen – notify if have symptoms up to 14 days after end of camp
- Non-pharmaceutical Interventions (NPIs)
  - Masking (80% reduction in transmission), gloves, gowns
  - Screening - Symptom monitoring (fever, cough, loss of taste/smell)
  - Hand washing
  - Distancing and density reduction
  - Cohorts/bubbles
  - Surface cleaning
  - Testing
- Vaccination requirements
- Development and implementation of a Communicable Disease Plan (CDP) if a staff member or camper is suspected of having COVID-19.<sup>4</sup>

## **Communication and Education**

2 <https://campnurse.org/wp-content/uploads/2020/07/CDC-Camp-Planning-Tool-July-2020.pdf>

3 <https://www.acacamps.org/resource-library/coronavirus/camp-business/field-guide-camps>

4 <https://www.campnurse.org/wp-content/uploads/2020/04/Comm-Disease-Plan-Example-2020.pdf>

## Campers

### Before Camp

- Prepare and distribute documentation containing rules and guidelines for campers to follow during their time at camp.
- Be familiar with answers to frequently asked questions<sup>5</sup> and common misconceptions related to the COVID-19 pandemic.
- Identify which staff and campers are at higher risk for complications related to COVID-19, and encourage and support them in taking additional precautionary measures including consultation with their healthcare provider. The healthcare provider should provide written documentation for requested accommodations for the individual.
- Provide information on any communication platforms, such as websites, automated text messaging, and telephone hotlines, to distribute information to staff, parents/guardians, and campers.

### During Camp

At the beginning of camp, hold small group training and demonstrate behaviors and precautions campers should abide by to prevent the spread of COVID-19, including:

- How and when to effectively wash and sanitize hands.
- How to practice physical distancing in various settings (cafeteria, classrooms, cabins, etc.)
- Which symptoms to look out for and when to report them and to whom
- When to stay home
- Coughing etiquette
- Other camp-specific policies or guidelines

***“Wash your hands, cover your face! Don’t forget to leave some space! If you feel sick please stay away! Don’t need no COVID here today!”***

- Speak in age-appropriate language: <sup>6</sup>
  - Early elementary school aged children: Provide brief, simple information that balances COVID-19 facts with appropriate reassurances that adults are there to help keep them healthy and to take care of them if they do get sick. Give simple examples of the steps they make every day to stop germs and stay healthy, such as washing hands. Use language such as “Adults are working hard to keep you safe.”
  - Upper elementary and early middle school aged children: This age group often is more vocal in asking questions about whether they indeed are safe and what will happen if COVID-19 spreads in their area. They may need assistance separating reality from rumor and fantasy. Discuss the efforts national, state, and community leaders are making to prevent germs from spreading and keep people healthy.
  - Upper middle and high school aged children: With this age group, issues can be discussed in more depth. Refer them to appropriate sources of COVID-19 facts. Provide honest, accurate, and factual information about the current status of COVID-19.

### Posters/Signage

Post relevant posters and signage from the CDC, WHO, and/or other health agencies in appropriate areas to encourage behaviors that mitigate the spread of disease:

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5 <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

6 <https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-climate-safety-and-crisis/health-crisis-resources/helping-children-cope-with-changes-resulting-from-covid-19>

- COVID-19 information
- Handwashing
- Cough etiquette
- Symptoms associated with COVID-19
- Stop the spread of germs
- Physical distancing

## **Parents/Legal Guardians Communication**

### **Before Camp**

- Inform parents/legal guardians about the precautions and procedures the camp has implemented/will implement to minimize the risk of COVID-19 exposure.
- Best practice: Provide information on any communication platforms, such as websites, automated text messaging, and telephone hotlines, to distribute information to parents/legal guardians.
- Identify which campers are at higher risk for complications related to COVID-19, and encourage and support them to take additional precautionary measures.
- Best practice: Recommend parents/legal guardians of higher-risk campers to consult their child’s medical provider to assess their risk and determine if attendance is acceptable.
- Communicate the importance of keeping campers home if they show any symptoms associated with COVID-19. Share the CDC Symptom Screening List:  
<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>
- Inform and seek consent from parents/legal guardians for any health monitoring (e.g., daily temperature readings) that will occur.

### **During Camp**

- Keep parents/legal guardians up to date on COVID-19 as it relates to the camp. Send parents/legal guardians regular newsletters or communications regarding the prevention efforts. If necessary, report the number of suspected and confirmed cases (if any), as well as the camp’s responses.
- If the decision to dismiss or end camp early is made, communicate these plans.

## **Staff Communication**

### **Before Camp**

- Provide training and educational material, including this guide, to staff. Include information on:
    - The camp administration’s responsibilities as they relate to COVID-19
    - Workplace controls, including the use of PPE
    - Their individual roles and responsibilities as they relate to COVID-19
  - Ascertain which staff members are at higher risk for complications related to COVID-19. Work with camp administration and camp health staff to determine if these staff members should not work as counselors or have prolonged direct contact with campers. Identify alternative job duties for these staff members, if warranted.
  - Communicate the importance of vigilantly monitoring their health for symptoms associated with COVID-19 and staying home if they are showing any.
- Maintain flexible leave policies:
- Do not require healthcare provider’s note for leave from work.

- Permit employees to take leave to care for a sick family member.
- Communicate strategies for administrative staff to telework from home if possible.

### During Camp

- Continue to provide educational material, including this guide, to staff and enforce training requirements. Include information on workplace controls, including the use of PPE.
- Be aware of workers' concerns about pay, leave, safety, health, and other issues related to COVID-19.
- Make administration available to hear concerns and answer questions related to these issues.

### Posters/Signage

Post relevant posters and signage from the CDC, WHO, and/or other health agencies in appropriate areas to encourage behaviors that mitigate the spread of disease. Examples:

- COVID-19 information
- Handwashing
- Cough etiquette
- Symptoms associated with COVID-19
- Don't Spread Germs at Work
- Social Distancing
- Stay Home If You're Sick

### **Vendor Communication**

- Inform vendors that access to the camp's facilities will be restricted.
- Request that vendors reduce the frequency of deliveries while simultaneously meeting the demand of ordered goods.
- Request that vendors use the same delivery driver for all deliveries for the duration of camp.
- Notify vendors to suspend deliveries and/or adjust maintenance schedules for services in the event camp is suspended.
- Inform vendors that, during deliveries, they are required to take precautions:
  - Maintain physical distancing between themselves and campers and staff
  - Wear appropriate PPE (a mask or face covering and gloves)
  - Do not make deliveries if they have symptoms associated with COVID-19

### **Local Health Officials Communication**

- Coordinate with local health officials; they should provide strategic assistance in the decision-making response to the COVID-19 pandemic with each camp.
- Work with your local health officials to develop a set of strategies appropriate for the camp.
- Inform local health officials on the camp operations scheduled.
- Alert local health officials on unusually high camper absenteeism rates. Regularly share camper absenteeism data with local health officials if requested.
- Notify local health officials of suspected and confirmed cases immediately.
- Seek guidance to determine whether to dismiss or end camp early if necessary.

## **Non-Pharmaceutical Interventions – Prevention of Spread**

- Screening - Symptom monitoring (fever, cough, loss of taste/smell)
- Hand washing
- Distancing and density reduction
- Masking (80% reduction in transmission)

**Communicate behaviors needed with signs, regular verbal reminders (before meals, announcement times, etc.)**

## Screening

### Pre-screening

Pre-screening requires that campers (with the assistance of parents/guardians) and staff members should self-monitor for 14 days and conduct pre-screening activities such as:

- Taking and recording their own temperature for 14 days before camp (refer to the individual instructions provided with the thermometer).
- Self-screening for the presence of symptoms (fever of 100.4 °F or greater, cough, shortness of breath, diarrhea, fatigue, headache, muscle aches, nausea, loss of taste or smell, sore throat, vomiting, etc.) within the past two weeks.
- Determining if, within the past two weeks, the individual has traveled nationally or internationally.
- Determining if the individual has been in close contact with a person who has been diagnosed with, tested for, or quarantined as a result of COVID-19.

### Initial (On Arrival) Screening

#### 1. Ask about **symptoms**:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

2. Next, check the **temperature** of the individual according to camp processes using an appropriate thermometer of choice. Refer to the original instructions provided with the thermometer. Clean the thermometer with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each camper or staff member.

3. If a camper or staff member is suspected to have COVID-19 based on this assessment then notify parents/guardians and appropriate healthcare providers (in accordance with local health officials) according to the Tall Oaks CDP.

### Ongoing Screening

Conducted on an as-determined basis (e.g., daily, every other day, or more frequently). Consider increased screening frequency during initial days of camp, when there is turnover of camp sessions/staff, when monitoring for potential exposures, or daily for day camps.

1. Ask about **symptoms**:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

2. Next, check the **temperature** of the individual according to camp processes using an appropriate thermometer of choice. Refer to the original instructions provided with the thermometer. Clean the thermometer with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each camper or staff member.

3. If a camper or staff member is suspected to have COVID-19 based on this assessment then notify parents/guardians and appropriate healthcare providers (in accordance with local health officials) according to the Tall Oaks CDP. Place a face mask on the individual. Isolate individual by separating symptomatic individuals by at least 6 feet. The area for individuals with symptoms should be at least 6 feet away from other areas of the health center or in a separate room. Health staff should wear an N95 respirator (for aerosol generating procedures) or face mask, a face shield or other eye protection, disposable gloves, and a disposable gown (if conducting aerosol generating procedures) while working with individuals who have a suspected case of COVID-19.

### Management of a Positive Case

1. Take care of the camper/staff member. If they warrant further clinical evaluation make arrangements to do so, either in-person or via telehealth.
2. If camper or staff member does not require immediate clinical evaluation, isolate the individual until appropriate return to home transportation can be arranged.
3. Contact tracing. It is crucial to carry out “contact tracing” immediately to determine the potential or confirmed case’s contacts with other campers or staff members over the previous two or more days. Assessing and informing those with potential exposure is a fundamental control strategy for minimizing spread within a group or camp population. CDC defines close contact as interactions within 6 feet for more than 15 minutes.<sup>7</sup>

### Hand Washing

#### Campers and Staff

- Before eating food (e.g., when entering the dining area)
- Upon entering your cabin

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<sup>7</sup> US Centers for Disease Control and Prevention. Principles of Contact Tracing. <https://www.cdc.gov/coronavirus/2019-ncov/php/principles-contact-tracing.html>

- After being in contact with someone who may have been sick
- After touching frequently touched surface (railings, doorknobs, counters, etc.)
- After using the restroom
- After using common items, such as sports equipment, computer keyboards and mice, craft supplies, etc.
- After coughing, sneezing, or blowing your nose

### Kitchen and Dining Staff

Existing best practices for food preparation apply. Coronavirus is not food-borne, but food service workers who are infected can transmit the virus to coworkers or diners. Refer to the Food Service section for more information. Hand-washing is equally important whether gloves are used or not and all recommendations apply regardless of glove use.

- Before and after using gloves
- Before, during, and after preparing any food
- After handling raw meat, poultry, seafood, and eggs
- After touching garbage
- After using the restroom
- After wiping counters or cleaning other surfaces with chemicals
- After coughing, sneezing, or blowing your nose
- Before and after breaks

### How to Wash Hands

1. Wet your hands with clean, running water. Turn off the tap and apply soap.
2. Lather your hands by running them together with the soap. Make sure to lather the back of your hands, between your fingers, and under your nails.
3. Scrub your hands for at least 20 seconds (about the time it takes to sing the “Happy Birthday” song twice.)
4. Rinse your hands well under clean, running water.
5. Dry your hands using a clean towel or an air dryer.

You may use paper towels to turn off the faucet and/or open doors of the bathrooms.

### How to Use Alcohol-Based Hand Sanitizer

Hand sanitizers should contain greater than 60% ethanol or greater than 70% isopropanol. Hand sanitizers are not a substitute for hand-washing for kitchen and dining staff.

1. Apply the product to the palm of one hand.
2. Rub your hands together. Make sure the product contacts the back of your hands, palms, between your fingers, and fingertips.
3. Continue to rub your hands together until your hands are dry (about 20 seconds).

### Common Misconceptions

- Water temperature is not important. Clean cold and warm water work equally well.
- Antibacterial soap is not more effective than regular soap.
- Bar soap and liquid soap are equally effective.
- Soap and water are more effective than alcohol-based hand sanitizer if hands are visibly dirty or greasy.
- If water is available but soap and hand sanitizer are not, rubbing your hands together under water and drying them off with a clean towel or letting them air dry can remove some germs. Only use this method as a last resort.

## **Distancing and Density Reduction**

The CDC encourages physical distancing through

- increased spacing
- small groups
- limited mixing between groups
- staggered scheduling
- staggered arrival and drop off.<sup>8</sup>

**\*\*\*Masks\*\*\*Masks\*\*\*Masks\*\*\*Masks\*\*\*Masks\*\*\*Masks\*\*\*Masks\*\*\***

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Masks are one of the most effective NPIs available to reduce the spread of COVID-19, particularly when used universally within a community. In camp settings masks should be worn universally by staff and campers. According to CDC, masks are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. Their use is most essential in times when physical distancing is difficult. Proper mask wearing alone can reduce the incidence of COVID-19 in a population by 75%. **Essential practices are in bold.**

**\*Campers should wear masks universally in all indoor locations other than while eating, sleeping, showering, and brushing teeth. Ensure at least 6 feet of physical distance is maintained between individuals during the limited times when masks are not in use.**

**\*Staff should wear masks universally at all times indoors, unless alone in a private office/room, eating, sleeping, showering, and brushing teeth. Ensure at least 6 feet of physical distance is maintained between individuals during the limited times when masks are not in use.**

**\*Masks should be worn by all campers and staff outdoors when at least 6 feet of physical distance cannot be maintained. Masks should be considered and encouraged outdoors for campers and staff at all times when they will be around other people.**

\*Campers should bring appropriate, reusable, masks for their own personal use to camp.

\*Campers should wear one mask and have a second one in a sealed plastic bag handy in case the first becomes wet or otherwise soiled during the day.

\*Overnight Campers should own and maintain a minimum of ten masks so that one or two can be worn each day and be washed weekly.

\*Masks should be identified by the camper's name or initials inside.

\*Masks should not be shared with anyone else unless in a case of need; it must be unused and unsoiled.

\*Campers will be responsible for maintaining and washing their own masks. Cleaning instructions depend on the cloth used to make the mask. In general, masks can be washed regularly along with general laundry using water and a mild detergent, dried completely in a hot dryer, and stored in a clean container or bag.

\*While wearing masks, campers and staff should avoid touching their face and the mask as much as possible.

\*Masks should only be put on, taken off, and handled with clean hands.

\*Fabric masks should have two to three layers of permeable fabric. Refer to CDC guidance on use of masks.<sup>9</sup>

**\*Ensure that masks completely cover the nose and mouth of all campers and staff and that masks fit snugly and don't have gaps.**

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8 U.S. Centers for Disease Control and Prevention. Youth Programs and Camps during the COVID-19 Pandemic. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/Camps-Decision-Tree.pdf>

9 <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html>

\*Face coverings or masks that have exhalation valves or vents that allow virus particles to escape. Are NOT permitted.

\*Individuals not able to wear masks during exercising may benefit from trying alternative styles including specialized athletic masks designed specifically for athletes.

### **Cohorts or Bubbles**

Cohorts or Bubbles use grouping strategies of staff and campers to reduce spread of infections and to allow for more rapid identification of suspected or confirmed cases of COVID-19. The CDC<sup>10,11,12</sup> and American Academy of Pediatrics<sup>13</sup> have developed strategies and policies to maintain small group sizes, limit mixing of groups, and restrict large gatherings at camps are recommended. Limiting mixing of groups can be combined with a public health approach of establishing and maintaining “concentric group circles” for infection prevention and control. Infection spread can be slowed and more easily contained in smaller groups; when larger groups are required, it is beneficial if they consistently are comprised of the same constituent smaller groups, thereby limiting the number of potential contacts for each camper. In the event of an outbreak, being able to promptly define the “inner circle” of close contacts is paramount for enhanced health surveillance and isolation. By using the small groups and cohort strategy, isolation and surveillance of close contacts can be implemented in short order.

In the Tall Oaks setting, groups coming in should consider the smallest practicable group of campers and treat this group as a “Household” or “Bunk groups.” This “Household” could be an age group, a pre-assigned program group in day or overnight settings, or a sleeping group/bunk in overnight settings. These groups should, to the extent possible, remain consistent over the camp program.

“Households” may join together with other “Households” for larger group activities; however, camp directors should realize that larger gatherings, especially inside buildings, increase the potential of communicable disease spread. Risk can be reduced for any gathering by splitting into smaller groups (by “household”), and outdoor programming, dining and programmatic groups should try to minimize mixing, maintain physical distancing between “households”, and provide facial coverings (when age and developmentally appropriate) when distancing cannot be accomplished. Holding activities outdoors as much as possible is recommended.

Overnight camps could additionally consider functioning as a contained circle or “bubble” within the larger local community and essentially “shelter in place” for the duration of the camp program. This approach would assist in containing communicable disease within camp boundaries. Overnight camps are encouraged to consider the concentric circles philosophy of “households”, and larger groups made up of “households” to prevent and slow disease spread and allow for target surveillance and isolation should cases occur. Overnight campers and staff should not mix with the day campers and staff.

Tall Oaks should endeavor to follow the “Best Practices” as outlined by the CDC:

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10 U.S. Centers for Disease Control and Prevention. H1N1. <https://www.cdc.gov/h1n1flu/camp.htm>

11 White House/U.S. Centers for Disease Control and Prevention. Guidelines for Opening Up America Again. <https://www.whitehouse.gov/openingamerica/>

12 U.S. Center for Disease Control and Prevention. Youth Programs and Camps During the COVID-19 Pandemic. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/Camps-Decision-Tree.pdf>

13 American Academy of Pediatrics, COVID-19 Planning Considerations: Return to In-person Education in Schools, <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/covid-19-planning-considerations-return-to-in-person-education-in-schools/>

- Organize camp into the smallest practical group sizes and to the extent possible keep groups consistent throughout the camp program.
- Organize campers and counselors into “households” that live, eat, wash, and do most group activities together or within subgroups.
- If “households” mix for programs or activities, consider other mitigation measures such as physical distancing or masks if appropriate and practical for the activity.
- Consistently construct larger gatherings of the same smaller groups or “households.” Note that group sizes must still comply with state and/or local requirements for proper staff to camper ratios and minimum staffing requirements.
- Larger gatherings, especially inside buildings, increase the potential of communicable disease spread. To reduce risk mass gathering could include splitting large assemblies into smaller groups (by “household”), outdoor programming, dining and programmatic changes to minimize mixing, physical distancing between “households” and facial coverings (as age and developmentally appropriate) when distancing cannot be accomplished.
- Staggered dining times is recommended depending on the size of the dining facility and its ability to allow physical distancing between “households.” Consider dining outside in “households” if possible and weather permits.
- Mixing between “households” should be particularly discouraged in the initial days of camp programs. Depending on the length of a given camp and/or the availability of testing, increasing interactions between “households” can be considered, particularly for overnight camps of more than two weeks.
- Consider arranging support staff by A and B shifts to minimize interactions among kitchen and cleaning staff whenever possible. Any switching of staff should be carried out after cleaning.
- Restrict parents, guardians and non-essential visitors from entering camp.
- For overnight camps, consider that counselors and staff do not leave camp on days or nights off.
- Make all staff of day and overnight camps aware of the best practices they can independently follow to mitigate spread<sup>14</sup> during time they spend off camp property.<sup>14</sup>

## **Surface Cleaning**

Recommended methods for typical cleaning procedures include two-stage cleaning and disinfecting.<sup>31</sup> “Cleaning” entails washing with a detergent and water to remove soil, organic matter, and some microorganisms from a surface. Following a detergent and water wash, “disinfecting” entails use of a U.S. Environmental Protection Agency (EPA)-approved disinfectant that must be applied in accordance with product manufacturer guidelines. Refer to the EPA List of Disinfectants for Use Against SARS-CoV2.<sup>15</sup> A dilute bleach solution can be substituted for EPA-approved disinfectants.

## **Increased Cleaning Frequency**

### *Communal Spaces*

- Cleaning and disinfecting of communal spaces between groups. Disinfection after cleaning may not be feasible if scheduling of group activities does not allow for disinfectant to remain on treated surfaces for sufficient time to fully disinfect.
- Educate staff on how to clean surfaces after use; ideally each group will clean after they have used a space or equipment.

### *Shared Items*

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<sup>14</sup> U.S. Centers for Disease Control and Prevention. How to Protect Yourself & Others. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

<sup>15</sup> <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

- Assigning items where possible to reduce the quantity of items shared.
- Cleaning and disinfecting of shared items between uses.

Examples of frequently touched surfaces include tables, drinking fountains, door handles, hand railings, light switches, countertops, cabinet handles, desks, phones, keyboards, toilets, faucets, and sinks. Any other surfaces frequently touched by campers or staff should be cleaned and disinfected at least daily or, preferably, several times per day.

Cleaning of outdoor structures made of plastic or metal can be carried out according to typical camp cleaning practices. More frequent cleaning of high touch outdoor surfaces, such as grab bars or railings, is recommended. Outdoor wooden surfaces, such as play structures or benches, can be cleaned according to standard camp practices and more frequently if needed to remove obvious soiling.

#### Changing Areas/Locker Rooms

- Good practice: As with other frequently touched surfaces, changing areas or locker rooms are cleaned and disinfected daily.
- Better practice: High touch surfaces within changing areas or locker rooms are cleaned more than once per day.
- Best practice: High touch surfaces in changing areas and locker rooms are cleaned between users.

#### Toilets, Showers, Restrooms

- Good practice: As with other frequently touched surfaces, toilets, showers, and restrooms are cleaned and disinfected daily.
- Better practice: High touch surfaces including toilets, showers, and restrooms are cleaned and disinfected more than once per day.
- Best practice: High touch surfaces including toilets, showers, and restrooms are cleaned and disinfected between users.

#### Personal Protective Equipment (PPE) for Cleaning Staff

Always refer to the Safety Data Sheet (SDS) of the product or products being used to obtain PPE requirements.

- Good practice: Eye protection and gloves must be worn when preparing cleaning solutions, including dilute bleach solutions.
- Better practice: Eye protection, disposable gloves, and gowns/aprons are worn for all tasks in the cleaning process, including handling trash.

When finished, all cleaning staff must remove gowns/aprons first, being careful not to contaminate the surrounding area. Next gloves are to be removed by grasping from the inside and peeling inside out. Hands must be thoroughly washed for at least 20 seconds using soap and water. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.

#### Surface Cleaning after a Confirmed or Probable COVID case

If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary. Continue routine cleaning and disinfection. If less than 7 days, close off areas that were used by the person who is sick and carry out the following:

- Open outside doors and windows to increase air circulation in the areas, if possible.
- Wait up to 24 hours or as long as practical before you clean or disinfect the space to allow respiratory droplets to settle before cleaning and disinfecting. Outdoor venues and equipment could be cleaned without delay.
- Clean and disinfect all areas used by the person who is sick. Run ventilation system during cleaning.
- Use dedicated cleaning and disinfecting materials to disinfect a potential source area (e.g., an infected camper’s cabin or bunk area). The cleaning equipment should not be used to clean other areas until they are thoroughly cleaned and disinfected.
- Enhanced cleaning is recommended if it is determined that a person with COVID-19 was present in a building (e.g., dining hall, gym, bunk, etc.) or at camp activity areas for at least 15 minutes.
  - First clean visibly dirty surfaces then perform disinfection. NOTE: Products that are specific to coronavirus, have an “emerging viral pathogen” claim, and require less than 1 minute of contact time are preferred. Make sure products have not passed their expiration date.
  - Use disposable wipes/paper towels to clean surfaces if possible, rather than reusable cloth wipes, as the latter can re-contaminate surfaces. All cleaning and disinfecting materials (e.g., paper towels, cloth wipers, sponges, mop heads, etc.) should be disposed in sealed bags or containers after use.
  - In each area, pay particular attention to high touch areas, including, but not limited to, handrails, door handles, cabinet and drawer handles, shared sports equipment or craft tools.
  - Clean and disinfect an area extending 12 feet in all directions around the camper’s sleeping quarters, focusing on all horizontal surfaces and high touch objects. Clean and disinfect areas identified as locations visited by the individual who is sick or that the individual used or occupied, including the entire bathroom and any common or activities areas. These include high touch objects in common areas including handrails, exterior door entry handles, cabinet handles, and restroom door handles, as well as crafting tools or sports equipment.
  - Use dedicated cleaning and disinfecting materials to disinfect a potential source area. These materials should not be used to clean other areas until they are thoroughly cleaned and disinfected.
  - Clean a potential source area by progressing from the entrance to the most distant point to avoid re-contaminating surfaces that have been disinfected (i.e., clean your way out).
  - Clean soft and porous surfaces such as carpeted floor, rugs, and drapes. NOTE: If some porous surfaces are not suitable for cleaning with disinfectants, then clean them as much as possible and attach a sign to them saying they are not to be used or touched for three days.

Examples of surfaces found in spaces:

### *Dining Hall*

- Tabletops
- Cafeteria/food trays
- Ice dispensers and buttons
- Refrigerator handles
- Vending machines
- Floors
- Freezer door handles
- Chairs/Benches

### *General and Cabins*

- Door handles/doorknobs
- Handrails
- Light switches
- Countertops
- Cabinet handles
- Drawer handles
- Stair and hall rails
- Any other surfaces frequently touched by campers or staff

#### *Frequently Touched Outdoor Surfaces*

- Grab bars
- Railings
- Play structures
- Picnic tables and benches
- Play equipment such as basketballs

#### *Bathrooms / Locker Rooms*

- Locker room counters
- Changing room benches and chairs
- Restroom counters
- Sinks
- Faucets
- Faucet handles
- Mirrors
- Restroom soap dispensers
- Toilets/urinals
- Toilet seats
- Toilet/urinal handles
- Restroom paper towel handles
- Restroom surfaces
- Restroom door handle
- Showers
- Shower handles

## **Considerations for Specific Spaces**

### *Camp Store*

- Instruct employees to report any COVID-19 symptoms 27 to their supervisors.
- If employees report respiratory illness symptoms, instruct them to stay home, or if in overnight camps to report to the health center and comply with isolation guidance.
- If an employee reports symptoms during work, send them home immediately or to the health center. Clean and disinfect their workstation. Inform the health center and follow the camp communicable disease plan (CDP).
- Allow camper access to the canteen on a schedule consistent with camper groups or activity cohorts so that only campers of the same pre-defined group shop together.
- Maintain a roster of qualified and trained staff to fill canteen positions.

- Where feasible, create partitions between shoppers and cashiers on checkout counters with a pass-through opening at the bottom of the barrier for passage of cash, charge/debit cards, products, etc. Devise alternative payment methods to avoid exchange of cash and coins (i.e., implement debit accounts to be settled at the end of specified time periods).
- If possible, arrange items for sale in an outdoor area (such as a picnic area or gazebo).
- Determine an occupancy limit which will allow for all shoppers to maintain physical distance of about six feet from one another. Post signage communicating this limit to shoppers and have a means of controlling appropriate shopper density.
- Determine an occupancy limit which will allow for all shoppers to maintain physical distance of about six feet from one another. Post signage communicating this limit to shoppers and have a means of controlling appropriate shopper density.
- Best practice: Post signs reminding shoppers to maintain six feet of physical distance. Provide these resources in additional languages and in illustrations as needed.
- Best practice: Place decals on floors six feet apart to indicate where to stand while in checkout lines.
- Best practice: Place arrow decals on the floor to direct foot traffic through the canteen in a unidirectional manner.
- Best practice: Remove seating in and near the canteen unless seating area can provide adequate space for individuals to maintain physical distance.
- All food for sale should be prepackaged.
- Station dispensers of alcohol-based hand sanitizer containing at least 60% alcohol at the canteen entrance for shoppers to use upon entry and exit.
- Garbage cans near the canteen exit and leave lids open unless they are equipped with foot-actuated lids.
- Remove decorative objects, flyers, and materials from tables and counters to allow for effective cleaning and sanitation.
- Perform as much stocking activities as possible during off-peak or after hours to reduce contact with customers.
- Provide remote shopping alternatives for campers to purchase souvenirs and merchandise before/after their camp session, including click-and-collect, mail delivery, and shop-by-phone to limit the number of customers in the canteen. Set up designated pick-up areas.

### *Cabins*

- Keep the same staff members assigned to a cabin throughout the program; do not rotate staff between cabins.
- Maintain the roster of cabin-members throughout the program; do not rotate campers between cabins. See the Cohorts section for guidance on organizing campers and staff members.
- Limit cabin access to only individuals who reside in that cabin; avoid having visitors and parents entering the cabin at drop off and pickup periods in the residential spaces.
- All cabin residents should use hand sanitizer containing at least 60% alcohol or wash their hands with soap and water, for at least 20 seconds, upon entry to their cabin.
- Avoid sharing common items (cups, bedding, etc.) as well as the sharing of individuals' items with cabin mates.
- Cabins should be cleaned routinely.
- Personal belongings should be limited to essential items plus a limited number of non-essential items.
- Campers should keep personal belongings organized and separate from other campers' belongings.
- Ideally campers should bring a personal storage space (i.e., cubby, footlocker, etc.) for their personal belongings.

### *Sleeping*

- Create at least six feet of space between beds. If utilizing head-to-toe orientation (see below) four feet of space between beds is acceptable.
- If possible, minimize the number of people sleeping in a space by converting common spaces to sleeping areas.
- Position sleepers head-to-toe or toe-to-toe to maximize distance between heads/faces:
  - For bunk beds, position the head of the camper in the top bunk opposite the position of the camper in the bottom bunk.
  - For side-by-side beds, position the head of the camper in one bed opposite the position of the camper in the adjacent bunk.
  - For end-to-end beds, position the toes of each camper close to the other camper's toes.
- Create physical barriers between sleepers, especially if a distance of six feet cannot be created, using curtains, sheets, barriers, etc.
- Use bedding (e.g., sheets, pillows, blankets, sleeping bags) that can be washed and dried in a mechanical air dryer. Keep each camper's bedding separate.
- Place a label with each camper's name on their bed.
- Store extra bedding in individually-labeled bins, cubbies, or bags.

### *Ventilation*

- Naturally by keeping windows open if weather permits, or
- Mechanically, by running heating, ventilating, and air-conditioning (HVAC) systems, cabin and bathroom exhaust fans, and pedestal fans, etc.
- During occupied periods for sleeping areas with mechanical ventilation, optimize outdoor air ventilation by operating HVAC systems at increased outdoor air rates (i.e., increase the percentage of outdoor air). The percentage of outdoor air delivered will be limited to cooling capacity of the HVAC system and its ability to provide an appropriate discharge air temperature while also controlling for humidity. Consider the use of portable HEPA air cleaners in the Health Center or residential bunks with persons in isolation.

### *Bathrooms*

- Avoid sharing common bathroom supplies (towels, soap, toothpaste, etc.). Instruct campers to bring their own bathroom supplies and a container for toiletries to be stored in for the duration of camp (for example, a bathroom tote or a 1-quart clear plastic bag labeled with their name).
- Campers should keep personal items in their bag or tote and store their bag or tote in a designated area.
- Keep soap, toilet paper, and paper towels in the bathroom stocked at all times.
- Create a staggered bathing schedule and limit the number of people using the facilities at one time.
- Place a trash can (with a foot-actuated lid or no lid) near the exit of the restrooms to make it easier to discard items.
- Post a Hand-washing sign in the bathroom to remind campers and staff when and how to properly wash hands.

**This document is based on the "Field Guide for Camps on Implementation of CDC Guidance" prepared by Environmental Health & Engineering, Inc. for the American Camp Association and YMCA of the USA, published on January 21, 2021.**

This document is available at

**<https://www.acacamps.org/resource-library/coronavirus/camp-business/field-guide-camps>**