Wehinahpay COVID-19 Field book

The objective of this Field Guide is to provide educational materials for camp staff to reduce potential exposures to and spread of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the virus that causes COVID-19. This information is consistent with the health and safety recommendations and ongoing monitoring efforts stated by the U.S. Centers for Disease Control and Prevention (CDC) and recommendations made by the Boy Scouts of America and American Camp Association.

**The Cohort System**

We will be running on the CDC recommended Cohort system. Troops will stay in groups of 20 or less and will travel together all day, each day. Campers remain at least 6 feet apart and will keep at least 12 feet away from other cohort groups. All campers in a cohort must be from the local geographic area (e.g., city, town, county, community). Troops must stay at least 12 feet away from people from other troops.

Each program area will host only one cohort group at a time and staff will clean and disinfect the area between groups. We have changed the program schedule to 3 hour activity blocks to make this easier.

Face masks must be worn at all times during camp (except when eating) when at least six feet of distance may not be maintained. Campers should bring reusable cloth masks with them when they come to camp. Campers and staff should choose those with two to three layers of permeable fabric. Campers should bring at least one additional mask in case one becomes wet or dirty. Face masks should only be put on and taken off with clean hands.

Campers and staff should avoid touching their faces when possible.

It is important for campers and staff to understand and follow the following before coming to camp:

1. Early identification of ill persons
2. Staying home while ill
3. Cough and hand hygiene etiquette
4. Encouraging the use of hand sanitizer

**Pre-Screening**

Offering pre-screening before campers and staff head to camp will give insight into each individual’s health status prior to arrival. We will be requiring all troops and staff to submit a Pre-Screening Form when they arrive at camp. We will also be performing another medical screening when campers and staff arrive at camp.

The Pre-Screening Form must be completed before travel to camp begins and will ask for the following from each individual going to camp:

* + Taking and recording their own temperature for 14 days before camp.
  + 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.

If a camper or staff member is flagged during the pre-screening process, they should be sent home immediately. Campers and staff that are flagged during the screening at arrival will not be allowed to stay at camp.

The initial health screening will be incorporated into the existing screenings required by BSA standards upon arrival for both campers and staff. As medical information evolves on COVID-19 in youth, the content of the screening form may be updated with additional information and questions. The results of this initial health screening will determine if an individual is permitted to enter camp or if they require additional screening and evaluation.

**ONGOING PROCEDURES**

If any camper or staff starts to exhibit symptoms, we ask that they avoid contact as much as possible as they make their way to the camp health officer. When someone suspected of having symptoms of COVID-19 are brought before the health officer, they must follow these steps:

1. Ask the individual if they have any COVID-19 symptoms: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>.
2. Next, check the temperature of the individual according to camp processes using an appropriate thermometer. Clean the thermometer with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each camper or staff member.
3. If camper or staff is suspected to have COVID-19 based on this assessment, 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.
4. Notify camp management, parents/guardians, and appropriate healthcare providers in accordance with guidance from your local health officials, following the communication guidelines in this document.

**RESPONSE AND MANAGEMENT OF CASE(S) OR PROBABLE CASE(S)**

If a staff member or camper is identified as having a potential or confirmed case of COVID-19, isolate the individual in the Family Center if at Wehinahpay. If this takes place at a different venue, identify a shaded area away from others that they can wait. Camp leadership will consider the following:

* Consider if a camper or staff member warrants further clinical evaluation, and if so, make arrangements to do so, either in-person or via telehealth.
* If camper or staff member does not require immediate clinical evaluation, isolate the individual until appropriate return to home transportation can be arranged.
* If camper or staff member does not require immediate clinical evaluation
* Make arrangements with camp administration and counselors to have the person’s belongings moved
* Clean the person’s sleeping areas according to CDP and procedures outlined in the Cleaning and Disinfection section of this Field Guide.
* Consider testing options and notification of State and local officials.

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. Contact tracing should be carried out by trained staff (e.g., public health staff, community health workers, trained volunteers) in conjunction with the local health department. However, camp health staff can utilize general principles of contact tracing to begin closely monitoring other potentially exposed individuals.

In cooperation with the local health department, camps might be asked to assist with contact tracing. Key CDC suggestions for contact tracing include:

* Always follow established core principles of contact tracing.
* Conduct contact tracing with only trained staff or trained volunteers. Training should be conducted prior to the start of camp.
* Identify contacts quickly and ensure they do not interact with other campers or staff members.
* Communicate with local and state health officials and all camp stakeholders.
* Monitor key components of contact tracing programs and improve performance as needed.

**GENERAL STEPS FOR PREVENTION AT OUR CAMPS**

HAND HYGIENE

When to Wash or Disinfect Hands – Campers and General Staff

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

HOUSING POLICY

When possible, each camper will have their own tent at camp, rather than sharing as they normally would. Staff members will be limited to 2 people per cabin room. In both situations, limit housing access to only individuals who reside in that cabin or tent; avoid having visitors and parents entering the cabin at drop off and pickup periods in the residential spaces.

All 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 or tent. Avoid sharing common items (cups, bedding, etc.) as well as the sharing of individuals’ items. Cabins and tents should be cleaned routinely. Refer to the Cleaning and Disinfection section of this guide.

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.
* Bathrooms and showers should be sanitized at least once a day.

TRADING POST

Because of the limited space inside the trading post, only two customers may enter at any given time. The rest of the troop can wait on the porch for their turn to go in if they would like, making sure to keep at least 12 feet away from anyone else from another cohort. Laminated catalogs of what we have in stock will be available on the porch so that Scouts and Leaders can start making selections before entering the store.

FOOD SERVICE

**CLEANING AND DISINFECTING STANDARDS**

To minimize transfer of coronavirus at camp, cleaning methods can be employed to reduce risk to campers and camp staff. Cleaning methods should follow the Centers for Disease Control and Prevention (CDC) guidance. staff should ensure that there is adequate ventilation when using cleaning products to prevent children or themselves from inhaling potentially harmful fumes that may be associated with some cleaning products.

Recommended methods for typical cleaning procedures include two-stage cleaning and disinfecting.31 “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: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2. A dilute bleach solution can be substituted for EPA-approved disinfectants.

Teaching areas, trading post, and dining facilities will be cleaned and sanitized between each group. Cleaning and disinfecting frequently touched surfaces and common spaces multiple times daily. 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.

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.

STEPS TO CLEANING/DISINFECTING

Prepare Detergent Spray Solution

1. Any staff member preparing spray bottles with detergent must wear eye protection/goggles and gloves.
2. Using the manufacturer’s instructions, fill spray bottle with the appropriate amount of detergent solution and water, if the manufacturer recommends dilution. A funnel (not to be used for consumables) can be used to reduce spills and splashing.
3. Replace the spray cap and label the detergent bottle with the contents using a permanent marker.
4. The detergent manufacturer’s instructions must be provided to all staff carrying out cleaning activities, and applicable Safety Data Sheets must be kept on file.

Prepare Disinfectant Spray Solution

1. Any staff member preparing spray bottles with disinfectant must wear eye protection/goggles and gloves and follow manufacturer’s instructions.
2. Using the manufacturer’s instructions, fill spray bottle with the appropriate amount of disinfectant solution and water, if the manufacturer recommends dilution. A funnel (not to be used for consumables) can be used to reduce spills and splashing.
3. A dilute bleach (sodium hypochlorite) solution can be used by adding 4 teaspoons of bleach per quart of water.
4. Replace the spray cap and label the disinfectant bottle with the contents using a permanent marker.
5. The disinfectant manufacturer’s instructions must be provided to all staff carrying out cleaning activities, and applicable Safety Data Sheets must be kept on file.

Typical Cleaning for Non-Porous Surfaces

1. Cleaning staff should wear eye protection and disposable gloves.
2. Using a detergent cleaning solution, spray 6 to 8 inches from the non-porous surface and wipe with clean paper towels (or according to manufacturer’s instructions) to remove visible contamination, if present.
3. Make sure the surface is dry before applying disinfectant.
4. Review the instructions provided by the disinfectant manufacturer to note the concentration, application method, and necessary contact time. This will vary by product and type of cleaning activity.
5. Allow the disinfectant to remain on the surface for the instructed time and wipe with paper towels.
6. After a cleaning task is complete, remove the gown followed by the gloves and dispose, as discussed in the PPE for Cleaning Staff section above. Carefully wash hands for at least 20 seconds with soap and water as described in the PPE section. Hand sanitizer may be used if water is not available and no visible dirt is observed on hands.
7. Reusable aprons or work clothing may be used, if laundered or washed after use.

Typical Cleaning for Porous Surfaces

CDC recommends removing or limiting use of soft and porous materials, such as area rugs and couches, as they are more difficult to clean and disinfect. At this time few products for use on porous surfaces are EPA approved. Products identified contain the active ingredients quaternary ammonium and hydrogen peroxide, both of which should be used carefully by trained staff.

1. Eye protection and gloves should be worn during cleaning activities.
2. First remove visible contamination, if present, and clean with appropriate cleaners indicated for use on porous surfaces.
3. Launder items, if applicable, in accordance with the manufacturer’s instructions using the warmest appropriate water setting for the items and then dry items completely.
4. Otherwise, use disinfectant products suitable for porous surfaces. 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.

WHAT TO DO IF THERE IS A CONFIRMED OR PROBABLE CASE OF COVID-19

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.

For a suspected or confirmed COVID-19 case, the following enhanced cleaning protocol should be followed:

* First clean visibly dirty surfaces then perform disinfection. For specific cleaning instructions see sections above: Typical Cleaning for Non-Porous Surfaces and Typical Cleaning for Porous Surfaces.
* 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 also using the procedure noted above for porous surfaces. 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.

**COMMUNICATION**

Prior to 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 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 trainings and demonstrations on 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
  + Which symptoms to look out for and when to report them and to whom
  + When to stay home
  + Coughing etiquette

Conversation

* Encourage campers to talk about how they are feeling. Tell campers they can ask you any questions and make yourself available to talk and listen.
* Be calm and reassuring; be careful not only about what you say but how you say it.
* Be a source of comfort.
* Listen for underlying fears or concerns. Ask questions to find out what a concerned camper knows about COVID-19.
* Let campers know that fear is a normal and acceptable reaction.
* Provide only honest and accurate information. Correct any false information they may have heard. Note: Make sure to be considerate with campers when correcting any information.
* If you do not know the answer to a question, say so. Do not speculate. Find answers by visiting the CDC website.
* Make sure campers know how the virus can spread and how to prevent it from spreading.
* Talk about what the camp is doing to protect campers from getting sick.
* Tell campers that even though the COVID-19 pandemic is serious, hospitalizations and death are rare, especially in young healthy individuals.
* Let campers know that teens and children seem to get a milder illness when compared to adults.
* Direct campers with questions you cannot answer and/or fears you cannot assuage to administration or the designated staff member(s) responsible.
* Have follow-up conversations with campers who have asked questions or expressed concerns.
* Staff and campers who are experiencing stress and anxiety should be referred to the Health Center for consultation by a medical professional. Posters/Signage
* Post relevant posters and signage from the CDC

In Case of a Confirmed or Suspected Case

* Interview the confirmed or suspected case and begin contact tracing in coordination with appropriate local and state health resources, as warranted.
* Advise those who have had close contact with a person diagnosed with COVID-19 to separate themselves, self-monitor for symptoms, and follow CDC guidance if symptoms develop.
* Maintain confidentiality; do not provide the name or any potentially identifying information of the confirmed or suspected case in communications in camp or outside of camp except for the campers’ parent/guardian and health authorities.