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Camp COVID-19 Action Plan

Require all sick individuals to stay home.

- Communicate to all families and staff the importance of staying home when sick prior to the start of camp season.
- Strictly enforce the follow guidelines and post them where they can be easily seen by all staff and parents:
 - If you or your child have a positive test for COVID-19 or if your doctor tells you that you or your child probably have COVID-19, you should stay home and away from others for a minimum of 7 days from the first day symptoms appeared AND until you or your child have been fever-free for 72 hours (with no fever-reducing medications) *and* had significant improvement in your other symptoms.
 - If you or your child test negative for COVID-19 or your doctor tells you that you do not have COVID-19, you should stay home until at least 72 hours after the fever is gone (with no fever-reducing medications) and symptoms get better.
- Any individual who believes they have had close contact with someone diagnosed with COVID-19 will not be permitted to enter the camp space, regardless of whether they are symptomatic or not. Exposed individuals should stay home and away from other people, and monitor for fever, cough, and shortness of breath during the 14 days after the last day of contact with the person sick with COVID-19.

Daily screening of all participants and staff prior to admittance into the camp space:

- Verbal screening protocol at check-in:
 - Today or in the past 24 hours, have you had any of the following symptoms?
 - Fever (temperature of 100.0F or above), felt feverish, or had chills?
 - New cough?
 - Sore throat?
 - Difficulty breathing?
 - Gastrointestinal symptoms (diarrhea, nausea, vomiting)?

- New nasal congestion or new runny nose?
 - New loss of smell/taste?
 - New muscle aches?
 - Unidentified rash
 - Any other signs of illness?
 - In the past 14 days, have you had close contact with a person known to be infected with the novel coronavirus (COVID-19)?
- Staff to perform visual inspection of the child for signs of illness, which could include:
 - Flushed cheeks
 - Rapid breathing or difficulty breathing (without recent physical activity),
 - Fatigue
 - Extreme fussiness
 - Confirm that the child is not experiencing coughing or shortness of breath.
- COVID-19 response person will be John Brinkman, Chief Operating Officer. In his absence, those duties will be handled by Adam Rodgers, Chief Exe

Preventative daily measures:

- *Camper groups*
 - Groups should be no more than ten (10) individuals.
 - Groups will be designated their own programming spaces, not to co-mingle with other groups during the camp day.
 - Counselor assignments will remain consistent throughout the week.
 - 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.
 - Coughing etiquette.
 - Other camp-specific policies or guidelines.
- *Staff conversations with campers*
 - 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.
 - Use age appropriate language and terminology.

- *Social Distancing*
 - Children should be kept six (6) feet apart as much as possible and frequently reminded not to hug, high-five, or have any other physical contact.
- *Hand Hygiene*
 - Hand sanitizer and/or soap and water will be ready accessible to all children (as appropriate to their ages) and staff.
 - CDC handwashing instructions posted at each station.
 - Staff should know and follow the steps needed for effective handwashing (use soap and water to wash all surfaces of their hands for at least 20 seconds, wait for visible lather, rinse thoroughly and dry with individual disposable towel).
 - Monitored handwashing for children at all necessary times throughout the day (upon arrival, before and after meals, after coughing and sneezing, after contact with bodily fluids, after contact with shared equipment, etc.).
 - Children and staff should wash their hands or use hand sanitizer often, making sure to wash all surfaces of their hands (front and back, wrists, between fingers, etc.).
 - Children and staff instructed to cover their mouth when sneezing or coughing with a tissue or their elbow. They should wash their hands with soap and water immediately afterwards.
 - CDC posting throughout facility.
- *Wear Cloth Face Coverings*
 - When feasible, staff members and children should wear masks or cloth face coverings within the facility and at all times when social distancing is not possible.
- *Regular Monitoring for Symptoms of Illness.*
 - Staff should be actively monitoring children throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting and children exhibiting signs of illness should be separated from the larger group.

Cleaning, sanitation and disinfection:

- Staff member designated for sanitation/disinfection throughout day, including:
 - Restrooms
 - Program spaces
 - Shared equipment
 - Hard surfaces
- Nightly deep cleaning of the entire facility.
- Staff clothing should not be re-worn until after being laundered at the warmest temperature possible.
- Reusable face masks to be sanitized nightly.
- When feasible, groups should be using equipment designated for that specific group.
- Follow EEC standards:

- <https://www.mass.gov/files/documents/2016/08/uf/sanitizing-disinfecting.pdf>

Showing symptoms at camp:

- Child
 - Immediately separate the child from other children and minimize exposure to staff.
 - Contact the child's guardian. The child should be sent home as soon as possible.
 - The family should consult their healthcare provider to determine if any testing or other medical is required.
 - Areas the child has come in contact with will be immediately sanitized and disinfected.
 - Whenever possible, said areas will be out of use for as long as possible.
- Staff
 - The staff member should be removed from others until she/he is able to leave the program.
 - Staff should return home to self- isolate and should contact their healthcare provider to determine if any testing or other medical care is indicated.
 - Areas the child has come in contact with will be immediately sanitized and disinfected.
 - Whenever possible, said areas will be out of use for as long as possible.

Frequently asked questions (from EEC):

- **What do we do if a staff member or child tests positive for COVID-19?** If COVID-19 is confirmed in a child or staff member:
 - Notify the local board of health. The local board of health will work with the child care center to identify anyone with potential exposure to COVID-19 based on the timing of the individual's illness and the types of interactions they had with other staff and children while they were infectious. Be prepared to provide the local board of health with a complete list of everyone identified as exposed and their address and phone number. If any exposed person is a resident of another city or town, that information will be shared with their local board of health. Note that exposure can occur while the person is sick and for 2 days before they start showing symptoms.
 - Anyone identified as possibly exposed based on the local board of health's assessment, should be informed and will need to self-quarantine (stay home and

away from other people) for 14 days following the last day that they had contact with the positive staff member. Inform the families of exposed children and exposed staff that they should monitor for symptoms and contact their healthcare providers if any symptoms develop.

- Alert your EEC Regional Director that a child or staff member has tested positive for COVID-19. Your Regional Director will inform DPH and may provide you with further guidance.
 - Close off all areas used by the person who is sick. Open outside doors and windows to increase air circulation in the areas.
 - Wait up to 24 hours or as long as possible before you clean or disinfect to allow respiratory droplets to settle before cleaning and disinfecting. Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
 - 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. Routine cleaning and disinfection should be continued.
- **When can a child or staff member who tests positive for COVID-19 return to the child care program?** If a child or staff member has a positive test for COVID-19 or the doctor tells them they probably have COVID-19, the child or staff member should stay home and away from others for a minimum of 7 days from the first day symptoms appeared AND be fever-free for 72 hours (with no fever-reducing medications) AND had significant improvement in their other symptoms. If the child or staff member tests negative for COVID-19 or the doctor says they do not have COVID-19, they should stay home until at least 72 hours after the fever is gone (with no fever-reducing medications) and symptoms get better.
 - **What do we do if a child's sibling, parent or other household member tests positive for COVID-19?** If anyone in a child's household (parent, grandparent, sibling, etc.) tests positive for COVID-19, the child will need to be kept home in quarantine for 14 days after the last time they could have been exposed to the family member with COVID-19.
 - **What do we do if a staff member's household member tests positive for COVID-19?** If anyone in a staff member's household tests positive for COVID-19, the staff member will need to be kept home in quarantine for 14 days after the last time they could have been exposed to the family member with COVID-19.