

Camp Pinebrook Procedures Summer 2020

These procedures are based on the group “cohort” model. This model places children together in small groups (“cohorts”). Children remain within their cohort throughout the day, and through their time at camp. While social distancing is maintained between cohorts, there is no social distancing between the children within a cohort.

1.0 Communication

Create a communication system for staff and families for self-reporting of symptoms and notification of exposures and closures.

Communication with Parents

- All parents will be informed of the new safety and exclusion procedures put in place for the summer of 2020.
- All parents must attest to having received and read these new safety and exclusion protocols and the communicable disease plan. All parents must agree to comply with these procedures.
- All families must furnish 2 additional emergency contacts authorized to pick up their children in the event that a parent or camper is ill.
- Parents will be required to screen their children each morning. Do not bring your child to camp with a fever of 100.0 or higher or if they are exhibiting symptoms such as chills, cough, shortness of breath, extreme fatigue, muscle or body aches, headaches, new loss of taste or smell, sore throat, congestion, nausea or vomiting, or diarrhea.
- Communicate to parents the importance of keeping children home when they are sick.
- Only one adult may drop-off and pickup. This adult must stay outside the building. During inclement weather, a staff member will come to the car to facilitate drop-off and pick-up.
- Encourage the same adult to drop-off and pick-up each day.

Communication with Staff

- Educate all staff on the symptoms of virus and the importance of vigilance and action. Symptoms include:
 - Fever
 - Cough
 - Shortness of breath
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Vomiting
 - Diarrhea

- Loss of taste or smell
- Ensure that staff are familiar with screening procedures.
- Train staff on appropriate hygiene so that they teach and assist children, including proper hand washing/sanitizing, avoiding touching their eyes, nose, and mouths, and covering their sneezes and coughs.
- During staff orientation, review CDC signage and video resource for proper hygiene.
- Remind staff of social distancing expectations, wearing masks, and avoiding groups during off hours (nights and weekends). Their decisions impact the health of fellow staff, campers, and families of all who are at camp.
- Train all staff in proper cleaning and disinfecting procedures.
- Train all staff how to correctly wear, remove, maintain and dispose of PPE/face masks.
- Train all staff concerning hand hygiene after removing gloves, including washing hands or using hand sanitizer.
- Information should be provided to all staff on proper use, and removal of disposable face coverings.
- Communicate to staff the importance of being vigilant in detecting symptoms in themselves and children. Staff must inform camp if they start to feel sick before arriving at camp.
- Remind all staff that cleaning and disinfecting products should not be accessible to children under any circumstances. The only exception to this is soap and hand sanitizer which should be accessible, though monitored by a staff member.

Communication with Children

- Teach and assist children, including proper hand washing/sanitizing, avoiding touching their eyes, nose, and mouths, and covering their sneezes and coughs.
- Instruct children to immediately report any symptoms of illness that they feel.
- Post signage around camp with visuals depicting proper handwashing/sanitizing techniques, avoiding touching eyes, nose, and mouths, and covering coughs/sneezes.
- When using a non-contact thermometer, it must be cleaned with an alcohol wipe between each use. The wipe can be reused as long as it remains wet, if it is agreement with manufacturer's guidelines.
- Staff shall record each child's temperature on the sign in sheet.
- Conduct a daily health screening off all individuals who enter the building. This screen reassures children that they are at a reduced risk for getting sick and that we have put many safety protocols into place.

Communication with Vendors

- Non-essential visitors will not be permitted on camp property during the day.
- To the extent possible, essential visitors will visit camp outside of camp-day hours.
- Visitors shall not have contact with children or staff.
- Any visitor entering camp must be screened prior to entering.

Communication with Local Health Departments, EMS, and Hospitals

- Check state and local Health Department notices daily about transmission in the area and adjust operations accordingly.
- Communicate updated emergency procedures to the local Health Department.
- Share our communicable disease plan with the local Health Department.
- Have the local Health Department review health and safety procedures for summer 2020.
- Inform the local Health Department immediately of any suspected or confirmed cases of Covid-19 within the camp.
- Monitor absenteeism and have a roster of trained back-up staff.
- Monitor health center traffic.

Communication with Healthcare Providers

- Consult with local healthcare providers regarding protocols and best practices.
- Share proposed protocols for review.

2.0 Content and Guideline Communication

Communication on Policies and Procedures

- Provide all parents, guardians, and staff members with written policies and procedures regarding health, safety, and exclusion for camp 2020.
- Have all parents, guardians, and staff attest that they have received, read and will comply with these policies and procedures.
- At staff orientation, review all health, safety, and exclusion policies and procedures.
- Place signage at the entrances to camp stating that no one with COVID-19, symptoms of COVID-19, or anyone exposed to someone with COVID-19 within the past 14 days may enter the camp property.

Updates and Communication from CDC, OSHA, and State of NY, and Westchester Department of Health

- Have a designated staff member check for daily updates on guidelines and outbreaks.
- Communicate any updated guidelines or regulations to staff and parents.

3.0 Health – Screening and Preventing COVID-19 Infections

Camper & Staff Health: Screening, Testing, and Assessment

- All campers and staff should screen themselves (or their parents/guardians) at home before departing for camp.
- Anyone exhibiting any symptoms should self-quarantine following CDC guidelines.
- All persons must be temperature screened and visually assessed daily before being admitted to camp. This temperature must be recorded in the daily attendance.

- Anyone with a fever of 100.0 or higher or other signs of illness will not be admitted to camp.
- Individuals waiting to be screened should stand ten feet apart from each other. Use tape on the floor/ground for spacing.
- The person doing screenings should maintain a six-foot distance, wear a mask, and ask each staff person and person dropping off children the following questions before they enter the facility. Exclude anyone who answers YES to any of the following questions:
 - Does anyone in your household have a fever (100.0 or higher), cough, shortness of breath, sore throat, vomiting, diarrhea, new loss of taste or smell, chills, muscle aches, or headache?
 - Has anyone in your household:
 - Had any of these symptoms since last time you were last here?
 - In the last 2 days, been in contact with anyone with fever, cough, shortness of breath, sore throat, vomiting, diarrhea, new loss of taste or smell, chills, muscle aches, or headache since the last time you were here?¹
 - Potentially been exposed to COVID-19 or have reason to believe you/they have COVID-19 in the last 2 days?²
- If the responses to all questions are “NO”, the individual seeking to enter camp should then be temperature screened. Following negative results from the temperature screening they must then wash hands as they enter camp or use hand sanitizer.
- If the person being screened answered “YES” to being in contact with someone who has symptoms of COVID-19, then he/she/they needs to supply a doctor’s note to camp. They will then be required to wait a minimum of 24 hours, allowing the nurse to make contact with their doctor.
- If the person being screened answers “YES” to being exposed to COVID-19, he/she/they may not attend camp for 14 days. This individual should remain quarantined in their home.
- When using disposable or non-contact thermometers, if staff did not have any physical contact with the child, staff do not need to change gloves before the next check.
- When using a non-contact thermometer, it may be cleaned with an alcohol wipe between each use. The wipe can be reused as long as it remains wet.
- Anyone exhibiting symptoms after being admitted to camp will need to get a doctor’s note to return to camp. And has to wait 24 hours after submitting note, so nurse has the opportunity to speak with the doctor and okay the camper or staff’s return to camp.
- Anyone with a fever of 100.0 or higher will be isolated in a quarantined room and monitored until they can be picked up.

¹ <https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>

² <https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>

- While waiting for a sick child to be picked up, staff should stay with the child in a room isolated from others. If the child has symptoms of COVID-19, staff should remain as far away as safely possible from the child (preferably, 6 feet) while maintaining visual supervision. Staff should wear a face covering and eye shield. If tolerated, the child should wear a cloth face covering as well.

Preventing Spread

- **Handwashing**
 - Wash hands often with soap and water for at least 20 seconds. Where soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol.
 - Always wash hands with soap and water or sanitizer with 60% alcohol or higher:
 - as soon as arriving at camp
 - before/after each activity, including swim
 - when hands are visibly dirty
 - after blowing one's nose, coughing, or sneezing
 - after caring for a sick person
 - after using the restroom
 - before eating, preparing, or handling food
 - Supervise handwashing by children of all ages and assist if needed. After assisting, staff members must wash hands.
 - Remember to supervise children when they use hand sanitizer to prevent ingestion. Alcohol sanitizer should be rubbed on all surfaces of fingers, hands and above wrists until dry.
 - Incorporate bathroom breaks and handwashing breaks.
 - Place posters describing handwashing steps near sinks.
- **Physical Distancing/Minimizing Contact**
 - Maintain consistent cohorts.
 - When cohorts are in a common area, they should remain at least 6 feet apart.
 - When waiting in line, individuals should remain at least 6 feet apart.
 - Do not allow contact sports.
 - No large group gatherings or field trips.
 - Specialists not assigned to specific cohorts must maintain a distance of at least 6 feet from group cohorts.
- **Face Masks and Cloth Face Covers**
 - Provide every staff member with a disposable mask.
 - If families want their child to wear a mask, they shall provide each child with a mask labeled with the child's name that will be stored in a clearly marked bag in the child's backpack when not in use; families should launder them daily in hot water and detergent.
 - Follow CDC Guidance for wearing cloth face coverings:
 - We will provide information on proper use, removal, and washing of cloth face coverings to staff and campers.

- Provide office staff and nurse's staff with fluid resistant disposable masks.
- Masks must be worn by staff at all time on camp property:
 - Especially when conducting temperature screening
 - Especially whenever caring for a sick or potentially sick person
 - Especially whenever food preparation is involved
 - Mask may be taken off when enter the pool during swim, but maintain 6 feet social separation.
- **Discrete Program Cohorts**
 - Children are grouped with the same children and counselors for the entirety of the summer.
 - Cohort sizes are limited to no more than 10 children.
 - Groups maintain social distance from groups but may have limited contact with groups in their larger cohort which is limited to 40 children for lunch or other specific times, such as drop-off and pick-up.
- **Response and Management of Case(s) or Probable Case(s)[2]**
 - If any camper or staff member is suspected of being ill, they should immediately go to the nurse's office to be temperature screened.
 - If the person has a temperature of 100.0 or higher or is coughing, has shortness of breath, muscle aches, nausea or vomiting, diarrhea, sudden onset of loss of taste or smell, and/or sore throat they should remain in the isolation room until they can be sent home.
 - Anyone with serious symptoms should seek medical attention immediately, by calling their doctor or 911 right away. More serious symptoms can include trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, bluish lips or face.
 - Anyone exhibiting symptoms should be excluded from the camp until they can answer YES to all the following questions:
 - Has it been at least 10 days since you first had symptoms?
 - Have you been without fever for three days (72 hours) without any medicine for fever?
 - Has it been at least three days (72 hours) since your symptoms have improved?
 - Household members and people who have been in close contact with someone who has had symptoms of COVID-19 should stay home as much as possible for 14 days and monitor themselves for symptoms. Close contact means within six feet for at least 10 minutes. If they experience symptoms of COVID-19, they should take the steps detailed above to prevent spread.
 - When dealing with sick children/staff, wear gloves and a facial mask and eye shield. Afterwards, dispose of gloves, face mask, disinfect eye shield, and wash hands immediately.
 - Notify local health officials, staff, and families immediately of a possible case while maintaining **confidentiality**.

- Inform those exposed to a person with COVID-19 to stay home and self-monitor for symptoms and follow CDC guidance if symptoms develop.

4.0 Facilities

Offices and Office Areas

- No unnecessary people shall be allowed to enter the camp office.
- All surfaces shall be disinfected daily.
- Electronic surfaces shall be cleaned and sanitized daily.
- Doorknobs should be cleaned daily.
- Office staff will be provided face masks.

Health Center and Sick Person Isolation Area

- Designate an isolation room for any person who becomes sick.
- If a child or staff member is suspected of having COVID-19, a face mask should be placed on the individual, where tolerated.
- Keep sick children and staff separate by at least 6 feet. Utilize a partition separating them from well children and staff until they can be sent home.
- Anyone caring for a potentially infected person should wear a liquid-resistant disposable mask, eye protection, disposable gloves, and disposable gown.
- Have the individual's personal belongings removed from all areas of camp by a person in protective gear and sent home in a sealed container.
- The CDC in this context defines "contact" as being within 6 feet of an infected individual for a minimum of 15 minutes.³
- Persons that may have come into contact with an infected person should be notified as soon and sensitively as possible while maintaining the patient's confidentiality.
- The CDC currently defines close contact as someone who was within 6 feet of an infected person for at least 15 minutes starting from 48 hours before illness onset until the time the patient is isolated.
- Use dedicated EPA approved (List N) cleaning and disinfecting materials to disinfect a potential source area. The cleaning equipment should not be used to clean other areas until they are thoroughly cleaned and disinfected.⁴
- 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." NOTE: refer to product label "contact time". 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

³ <https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>

⁴ <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

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, 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.

Dining Areas

- Dining areas will have tables spaced at least 6 feet apart.
- Every cohort will have an assigned table with assigned seating for the summer.
- Tablecloths will be cleaned and disinfected after each lunch period.
- Garbage cans will not have lids unless they are foot pedal-operated.
- Staff will wipe down tables and benches before the cohort sits down to lunch.

Indoor and Outdoor Athletic Facilities

- All common and shared spaces will be cleaned and disinfected before/after each period or use.
- All children and staff in different cohorts must socially distance when in a common space.
- To the extent possible, activities will be held outdoors.
- When running activities outdoors is not possible, activities will be held indoors with windows and doors open as feasible.

Sports Equipment

- All sports equipment shall be sanitized after each period of use.
- Any equipment that is contaminated with bodily fluids should not be used until it can be cleaned and sanitized.

Building Ventilation

- All buildings will be properly ventilated to ensure adequate airflow.
- When possible, windows and doors will remain open to allow fresh air to circulate prior to and during use of the space.

Common and Shared Spaces

- All common and shared spaces will be cleaned and disinfected before/after each period or use.
- All children and staff in different cohorts must socially distance when in a common space.

Cleaning and Sanitizing

- Clean and disinfect activity areas and equipment in between each period.
- Wear disposable gloves.
- Clean surfaces with soap and water or detergent.
- Disinfect surfaces by following manufacturer's guidelines regarding "contact time" (length of time it must stay wet on the surface before wiping up). one of the following cleaning methods is allowed:
 - an EPA-approved List-N disinfectant
 - An alcohol solution containing at least 60% alcohol (must be allowed to sit for 1 minute).
 - a bleach solution (bleach label must specify that it is not expired and is intended for disinfection; solution should be 1/3rd cup per gallon of water and must be mixed daily, 1:10 dilution), allowed to sit for 1 minute.
- Clean and disinfect frequently touched surfaces regularly (minimum daily), including tables, doorknobs, light switches, counters, chairs, toilets, faucets, sinks, water coolers, computers, etc.
- Wipe down all electronic equipment/surfaces after use.
- Build in gaps between activities to allow time for cleaning.
- Routinely check and refill hand sanitizer at entries, and soap and paper towels in bathroom.
- For any fabric/soft surfaces requiring cleaning, launder on highest appropriate temperature and dry thoroughly.
- When cleaning areas in contact with a sick person, wear disposable gloves, mask, and if possible disposable gown or something comparable. After sanitizing, be very careful when removing disposable clothes to avoid contaminating nearby surfaces.
- Equipment that cannot be sanitized should not be used.
- Any equipment that is contaminated with bodily fluids should not be used until it can be cleaned and sanitized.
- Provide EPA-approved wipes to staff for quick and easy disinfecting.

Pools

- Swim periods will be limited to 1 cohort per pool.