



Camp Bethel's "School's Out ~ Camp's In" Fall 2020 Semester Day Camps COVID-19 Health Plan

Camp Bethel's Fall program "School's Out Camp's In" will run in compliance with Centers for Disease Control and Prevention (CDC) and the Virginia Department of Health (VDH).

I. Orientation and Training for Staff and Students

All Camp Bethel Staff will participate in training sessions focusing on COVID-19 mitigation strategies and prevention aligned with CDC guidance. Policies, practices, and procedures will be communicated with staff, parents, and students.

Staff Training topics will include:

- a. Signs and symptoms of COVID-19 and how it spreads
- b. Cough and sneeze etiquette
- c. Hygiene practices
- d. Physical distancing requirements
- e. Use of cloth face coverings
- f. Daily health screening procedures
- g. Procedures to follow if staff, students, or volunteers are feeling ill

II. Promote Healthy Hygiene:

Camp Bethel will provide soap and paper towels in restrooms. Hand sanitizer stations are available throughout campus. Camp Bethel will keep materials and supplies maintained and stocked by staff. Camp Bethel will post signs and messaging to promote healthy hygiene. CDC signs and messaging are posted in high-traffic areas throughout campus.

Camp Bethel will also provide:

- A designated isolation areas for symptomatic students and staff.
- Disinfectant wipes
- Disinfectant spray
- Latex-free gloves
- OSHA kit (gown, goggles, N-95 mask, hair covering, feet covering)?
- Disposable masks
- Infrared thermometers

III. Promote physical distancing:

Camp Bethel will designate each group to one building for the entire semester to ensure physical distancing is maintained. Groups will never switch buildings. Students will only interact with persons in their group, not other groups. The CDC advises that individuals maintain 6 feet of distance to reduce the risk of COVID-19 transmission.

Students and Staff will be required to wear cloth face coverings while indoors and whenever physical distancing requirements cannot be met. Disposable masks will be supplied when necessary, although we encourage students to bring their own.

Shared spaces where groups may congregate will be marked to promote physical and social distancing and will only be open to one group at a time. Shared spaces will be properly cleaned between groups.

When the weather permits, groups will spend as much time outside as possible.

IV. Symptom Monitoring

- A. Staff Screening:** All Camp Bethel staff will be required to check their temperatures and complete a self-screen for symptoms upon reporting to work. Staff who determine they must stay home from work based on the COVID-19 daily health screening responses will first contact the Camp Director.
- B. Student Screening:** All students must complete self-screening questions upon arrival each day. Temperature checks will be conducted at Camp Bethel daily during the check-in process. Check-In will be facilitated at the entrance of Camp while the student is still in their vehicle. Once cleared, students will be driven to their assigned building where only the student will exit the vehicle. During dismissal, students will be picked up from their assigned building.

Camp Bethel will follow rigorous adherence to the following guidelines: Students will be required to stay home when they are sick or when they have recently had contact with a person with COVID-19. If students have ANY of the following symptoms, they are required to stay home and follow specific guidance from his or her healthcare provider:

- *A new fever (100.4°F or higher)*
- *A new cough, shortness of breath, or difficulty breathing that cannot be attributed to another health condition*
- *New chills that cannot be attributed to another health condition*
- *A new sore throat that cannot be attributed to another health condition*
- *New muscle aches (myalgia) that cannot be attributed to another health condition or specific activity (such as physical exercise)*
- *New congestion, runny nose, or headache which cannot be attributed to another specific health condition*
- *A new sudden loss of taste or smell*
- *Other gastrointestinal symptoms like nausea, vomiting or diarrhea*

Note: The above list is not intended to be a comprehensive list of all possible symptoms. If a parent or guardian has concerns with regard to his or her child's health, the parent or guardian should contact his or her healthcare provider.

Flexible sick leave policies and practices:

- Students and staff will be required to stay home if they are sick, show signs of illness, or have been exposed to COVID-19.

V. Hygiene Practices: Cleaning and disinfection protocols

Camp Bethel staff will follow cleaning and disinfecting protocols established by the Camp Director which are consistent with CDC recommendations and Occupational Safety and Health Administration (OSHA) standards. High touch surfaces (in each group's home base) will be wiped down with a disinfectant multiple times each day. Camp Bethel staff will have access to the supplies to conduct this routine cleaning. Camp Bethel staff will disinfect their home base and high touch surfaces throughout the building at the start and end of each day with EPA approved products.

Any shared equipment must be cleaned prior to use by another group. Camp Bethel will follow the steps outlined in the CDC recommendations (<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-buildingfacility.html>) for cleaning and disinfecting areas if someone becomes sick with COVID-19 related illness:

1. Close off area.
 - If exposure occurs in an isolation area and if feasible, wait 24 hours before cleaning or disinfecting the area.
 - If exposure occurs in a common area, Camp Bethel staff will disinfect the area immediately.
 - Clean and disinfect all areas utilized by the individual in adherence to the designated Camp Bethel training standards.
 - Once the area has been appropriately disinfected, it can be open for use.
2. Provide additional hand sanitizer/handwashing stations
 - Soap and paper towels are available in restrooms in each building.
 - Hand sanitizer stations are available throughout campus. These materials and supplies are maintained and stocked by camp staff.
3. Ensure adequate supplies to minimize sharing to the extent possible (e.g. dedicated student supplies, equipment, etc)
 - Student belongings will be separated from other student belongings whenever possible.

- Staff will ensure adequate supplies of materials for each home base use to minimize the sharing of high-touch materials to the extent possible (e.g. art supplies) or limit the use of supplies and equipment by one group of children at a time and clean and disinfect between use.
- Any camp equipment, materials, or supplies used by a student or groups of students will be cleaned prior to use by a different student or groups of students according to established cleaning and disinfecting protocols. Camp staff will notify the Program Coordinator when additional supplies are needed.

VI. Align plans for gatherings, field trips, and volunteer restrictions consistent with any Executive Order in place:

- All gatherings must adhere to the limits of the current Executive Order.
- Camp access by non-essential volunteers and visitors may be limited or denied.
- Parents or other visitors will not be permitted to enter facilities or home base to deliver food or to eat lunch with their children.
- All volunteers/visitors will be screened using the Camp Bethel COVID-19 Health Screening form.

VIII. Preparing for When Someone Gets Sick

A. Separate and isolate those who present with symptoms:

Students or staff who arrive at camp and report feeling ill or who are displaying COVID-19 symptoms will immediately be relocated to a designated isolation area. The student or staff member with signs of illness or COVID-19 symptoms will not be permitted to remain on site.

Procedures for Students or Staff with COVID-19 Symptoms:

1. Isolate symptomatic students and staff as soon as possible, away from other staff and students.
2. Have the symptomatic person don a face covering or mask and sit in a separate area from all other students and staff until he or she can leave site.
3. The Program Coordinator, or other staff member will maintain physical distancing while monitoring the symptomatic staff or student until the staff or student can be safely transported home or to a healthcare facility.
4. The CDC/VDH guidelines will be followed when determining actions to take (who should go home, who should be quarantined, how long someone should be required to stay out of camp or work, and when they can return, etc.). See the enclosed document published by the VDH entitled: ***When It Is Safe to Be Around Others: Ending Isolation in Non-Healthcare Settings***
5. The Program Coordinator will work directly with staff and the parents of students who are exhibiting symptoms or who may have been in contact with someone who was positive for COVID-19 and will help develop a plan for each student or staff member.
6. Each student or staff member with a confirmed COVID-19 case will be tracked by the Program Coordinator. The timelines and protocol for returning to camp will be monitored using VDH guidelines.
7. The local health department will be contacted if additional information is required.
8. Camp Bethel will follow steps outlined in the CDC recommendations (<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-buildingfacility.html>) for cleaning and disinfecting areas if someone becomes sick with COVID-19 related illness.

Note: All confirmed COVID-19 cases among staff or students will be reported to the VDH. The Camp Director and the VDH will work collaboratively to identify any close contacts in the camp. If it is determined there has been an outbreak in a group or at camp, the Camp Director and the VDH will work together to develop a message that will notify the staff and students who were potentially exposed.

Policies for return to class/work after COVID-19 illness:

- Individuals will need a written release from their HCP (Health Care Provider) prior to returning to class/work after a positive COVID-19 diagnosis or illness.

For questions or concerns, please contact our Program Coordinator, Jenna Stacy Mehalso at CampBethelOffice@gmail.com or 540-992-2940.

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WHEN IT IS SAFE TO BE AROUND OTHERS:
ENDING ISOLATION IN NON-HEALTHCARE SETTINGS

For persons with confirmed or suspected COVID-19 to know when they are likely no longer contagious:

Determining the end of isolation WITHOUT additional TESTING 	<p>If you had COVID-19 symptoms and were directed to care for yourself at home, you can leave your "sick room" and home after these 3 things have happened:</p> <ul style="list-style-type: none"> ✓ You have had no fever for at least 3 days (that is 72 hours of no fever without the use of medicine that reduces fevers), AND ✓ Other respiratory symptoms have improved (for example, when your cough or shortness of breath have improved), AND ✓ At least 10 days have passed since your symptoms first appeared. <p>If you tested positive for COVID-19 and never had any symptoms and were directed to care for yourself at home, you can leave your "sick room" and home if:</p> <ul style="list-style-type: none"> ✓ At least 10 days* have passed since the date of your first positive COVID-19 diagnostic (molecular) test, AND ✓ You continue to have no symptoms (no cough or shortness of breath) since the test. <p><small>*Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after the first positive test.</small></p>
Determining the end of isolation WITH additional TESTING 	<p>If you had COVID-19 symptoms and will be tested to determine if you are still contagious, you can leave your "sick room" and home after these 3 things have happened:</p> <ul style="list-style-type: none"> ✓ You no longer have a fever (without fever-reducing medicine), AND ✓ Other respiratory symptoms have improved (for example, when your cough or shortness of breath have improved), AND ✓ Negative results of an FDA Emergency Use Authorization COVID-19 diagnostic (molecular) test from at least 2 consecutive respiratory specimens collected at least 24 hours apart (total of 2 negative specimens)**. <p>If you tested positive for COVID-19 and never had any symptoms and will be tested to determine if you are still contagious, you can leave your "sick room" and home after receiving:</p> <ul style="list-style-type: none"> ✓ Negative results of an FDA Emergency Use Authorization COVID-19 diagnostic (molecular) test from at least 2 consecutive respiratory specimens collected at least 24 hours apart (total of 2 negative specimens)**. <p><small>**All test results should be final before isolation is ended. There have been reports of prolonged detection of RNA without direct correlation to viral culture, however; detecting viral RNA via PCR does not necessarily mean that infectious virus is present.</small></p>

- A longer time frame after recovery may be desired to minimize the chance of prolonged shedding of active virus for 1) healthcare personnel in close contact with vulnerable persons at high-risk for severe COVID-19 and 2) persons who have conditions that might weaken their immune system. Such persons should consult with their healthcare provider; this might include additional PCR testing.
- Healthcare personnel should be excluded from work during isolation and then follow [Return to Work Practices and Work Restrictions](#) of universal source control and self-monitoring for symptoms.
- Based on CDC guidance for [Discontinuation of Isolation in Non-Healthcare Settings](#) aimed to prevent most instances of further spread.

June 22, 2020

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WHEN IT IS SAFE TO BE AROUND OTHERS:
ENDING QUARANTINE AND RETURN TO WORK FOR EXPOSED PERSONS

A potential exposure means having close contact with a person with COVID-19: being within 6 feet for at least 15 minutes starting from 2 days before the person became sick (or 2 days before specimen collection if asymptomatic) until the person was isolated.

<p>HOUSEHOLD CONTACTS</p> <p>Self-quarantine (stay home) and monitor for symptoms while the person is home and for 14 days after the person has been released from isolation (because exposure is considered ongoing within the house)*.</p> <p><small>Note: This means that the household contacts may need to remain at home longer than the initial person with COVID-19</small></p> <p>*If you are able to have complete separation from the person in your house with COVID-19 (this means no contact, no time together in the same room, no sharing of any spaces, such as same bathroom or bedroom), then follow time frame for non-household contact</p>	
<p>NON-HOUSEHOLD CONTACTS</p> <p>Self-quarantine (stay home) and monitor for symptoms until 14 days after the date of last contact with the person infected with COVID-19.</p>	
<p>HEALTHCARE PERSONNEL</p> <p>Asymptomatic healthcare personnel (HCP) with potential exposure to patients, visitors, or other HCP with COVID-19 may be assessed for exposures and advised on work restrictions for 14 days after their last exposure. Exposures include close contact when appropriate PPE is not used, especially for aerosol-generating procedures. If staffing shortages occur, it might not be possible to exclude exposed HCP from work; see CDC strategies to mitigate HCP staffing shortages.</p>	
<p>CRITICAL INFRASTRUCTURE WORKERS</p> <p>Personnel filling essential critical infrastructure roles (as defined in CISA Framework) should self-quarantine for 14 days after their last exposure, but may continue to work if they do not have any symptoms and additional precautions are taken to protect them and the community. Follow VDH recommendations for critical infrastructure workers (non-healthcare) potentially exposed to COVID-19.</p>	

Based on CDC guidance for [Community-Related Exposures](#), [Risk Assessment and Work Restrictions for HCP](#), and [Critical Workers Exposed to COVID-19](#)

June 22, 2020