

Office of Child Care & Regulatory Services

COVID-19 **LICENSED Summer** **Camp** **Guidelines**

June 30, 2020





The information provided by Office of Child Care and Regulatory Services is intended to offer guidance to assist LICENSED Summer Camps regarding current Best Practice considerations in addressing the novel coronavirus (COVID-19).



Symptoms of COVID-19

Anyone showing signs of illness of any kind or who may have been exposed to COVID-19 should not be permitted to enter a LICENSED camp facilities.

See VI Rules & Regulations Section 704 on Illness & Injury, Pg. 29.

fever*

cough

shortness of breath and/or difficulty breathing

Additional symptoms include chills and loss of taste or smell; however, children typically experience vomiting and diarrhea and while their symptoms are similar to adults, their condition may be milder.

- * Fever is determined by thermometer readings of **100.4 °F/38 °C** or higher or by subjective signs such as flushed cheeks, fatigue, extreme fussiness, chills, shivering, sweating, achiness, headache, not eating or drinking. (per CDC.gov guidelines). Also check the CDC website for regular updates.



Symptoms of COVID-19



Drop-Off/Pick Up Procedure:

☐ Before arrival: Ask parents to be on the alert for symptoms of **COVID-19** and to keep child(ren) at home if they are showing any sign of illness.

☐ If possible, the same parent or designated person should be responsible for dropping off and picking up children from a LICENSED camp facilities. Avoid designating persons considered “high risk”, such as grandparents 65 and older.

☐ Develop a staggered physical distancing schedule for arrivals and departures to limit direct contact with multiple parents.

- ☐ Have a staff member—that is not considered “high risk” — greet children at the entrance of the facility as they arrive.
- Staff members must conduct visual wellness checks of children **DAILY**. Staff are required to check the child’s temperature **DAILY**, if the temperature reading is 100.4 °F/38 °C or higher the child must be prohibited from entering the facility. All temperature checks must be logged **DAILY**.
- If a sign-in log is used, ask parents/caregivers to bring their own pen for signing children in and out of the camp facility.



Screen children and staff by:

- ☐ Visually inspect persons for signs of infection such as flushed cheeks, fatigue, or extreme fussiness.
- ☐ Conduct temperature screenings using the procedures on slide
- ☐ Record temperature and any symptom on a daily health screening log

Health screenings should be repeated periodically throughout the day on staff and children to check for new developing symptoms.

Date	Person's: Full Name	Staff	Child	Visitors	Volunteers	Temperature/Time taken upon arrival	Temperature/Time taken upon departure	Comments

Complete daily health screening for staff and children upon arrival and departure.

Health screenings should be repeated periodically throughout the day on staff and children to check for new symptoms developing.

Drop-Off/Pick Up Procedure:

- ☐ Designate a staff member to escort children to an assigned rooms. At the end of the day, the assigned staff member should escort the children to the person designated to pick them up.
- ☐ Staff should discourage gatherings at arrival and drop-off areas. Remind parents and caregivers of the necessity to maintain social distancing to reduce chances of contracting **COVID-19**.
- ☐ Handwashing hygiene stations should be set up at the entrance of the facility for staff and children to wash their hands before entering the premises. If a sink with soap and water is not available, provide hand sanitizers with at least 60 percent alcohol. Keep hand sanitizers out of children's reach and ensure their hands are thoroughly clean.

Maximum Number of student per Licensed Camp Facility – 50 students

COVID-19 Ratio Chart

Group Ages	Adult/Student Ratio	Group Size (Includes Camp Counselor/Leader)
2 – 5 Years	1 - 8	9
6 – 9 Years	1 - 10	11
10 – 14 Years	1 - 10	11



Camp Counselor Requirements



1. 18 years and older
2. Sex Offender Check
3. Local VIPD Check

Prevent virus that causes **COVID-19** from entering the building

- Post **COVID-19** information sheets/posters at all entrances to the facility. (See attached Flyers for postings)
- Only allow authorized ratio of children, and staff–required for daily operations, inside the buildings and classrooms.

To reduce spread of any Virus:

- Teachers should be assigned to one room with the same group of children.
- Reduce the number of people coming in and out of rooms.
- Limit the use of “floater” teachers to one per room to provide coverage for staff during meals and breaks.
- Reduce the number of volunteers to the camp facility.

- Limit visitors to a LICENSED camp facility other than DHS, Fire & Health Inspectors health care professional and therapy’s, resources teachers. (All visitors are to wear a mask)
- Conduct daily health screenings on all individuals entering the facility. Screenings will identify and substantiate the necessity to prohibit individuals from entering a LICENSED camp facility if they are experiencing any of the following five indicators:

1. Person showing symptoms of **COVID-19**
2. Person awaiting results of their **COVID-19** test
3. Person tested positive for **COVID-19**
4. Person is awaiting the results of testing for **COVID-19**
5. Person under investigation (PUI)

Prevent virus that causes **COVID-19** from entering the building

☐ Exclude children and staff who share a home (including siblings) or who have been in close contact with anyone in the five categories above.

☐ People who may be at higher risk of severe illness from **COVID-19**:
People aged 65 years and older,

People with a compromised immune system

☐ Restrict the following persons from entering a LICENSED camp facilities:

- Everyone, including children, parents, staff etc., living with or exposed to persons diagnosed with **COVID-19**.
- Ailing staff should stay at home using flexible sick leave per the facility's paid leave policies

Prevent virus that causes **COVID-19** from entering the building

- Persons of all ages with underlying medical conditions, particularly if not well controlled, including:

- People with chronic lung disease or moderate to severe

People who have serious heart conditions.

- People who are immunocompromised – Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications.
- People with severe obesity (body mass index [BMI] of 40 or higher).
- People with diabetes, chronic kidney disease undergoing dialysis, or liver disease.

Preventing the spread of **COVID-19** in a room

- ❑ Follow social distancing strategies per CDC guidelines.
- (Requirement) Post signage and other messaging to remind staff of physical distancing.
- Six-foot spacing indicators should be displayed in waiting areas to maintain social distancing.
- All persons entering a LICENSED camp facilities must adhere to the Virgin Islands' Child Care Rules and Regulations with emphasis on **COVID-19** flexibility requirements.
- Children assembling should be kept to small groups (do not exceed ratio and capacity requirements—see **Slide 9 Ratio Chart**).
- Provide developmentally appropriate activities for smaller groups. Rearrange furniture and play spaces to maintain 6 feet separation when possible.
- If possible, daily classes should be comprised of the same children and staff member.
- Deter daily group activities that may promote transmission of **COVID-19** such as mixing classrooms.
- Keep each group of children in their assigned rooms or in an outside setting throughout the day (**including lunch and snack times**)
- Modify daily group activities that may promote transmission of **COVID-19** such as mixing classrooms.
- Limit the mixing of children (e.g., staggering playground times, keeping groups separate for activities such as art and music).
- If possible, at mealtime, ensure that children are spaced out as much as possible, ideally 6 feet apart.



Preventing the spread of **COVID-19** in a room

- All personal items must be labeled and kept in a separate bag or container to ensure personal items are separate from others
- Extend the indoor environment to outdoors and bring the class outside, if weather permits.
- Provide developmentally appropriate activities for smaller groups. Rearrange furniture and play spaces to maintain 6 feet separation when possible.
- Follow proper hand hygiene guidance for adults and children such as washing hands frequently with soap and water for at least 20 seconds (about as long as it takes to sing “Happy Birthday” twice). Use this time as an opportunity to reinforce healthy habits and monitor proper hand washing
- Upon arrival in a room in the morning
- Before and after eating meals and snacks
- After blowing noses, coughing, or sneezing or when in contact with body fluids
- After toileting usage
- Sanitize the sink and toilet handles before and after each child’s use
- Teach children to use a tissue when using the handle to flush the toilet
- Wash hands for 20 seconds and use paper towels to dry hands thoroughly

Preventing the spread of **COVID-19** in a room

- ❑ Post signs in restrooms and near sinks that convey proper hand washing techniques.

Ensure ventilation systems operate properly and increase indoor air circulation as much as possible by opening windows and doors, using fans, or other air circulation methods. Do not open windows and doors if they pose safety or health risk to people using the camp facility. See Section 802 Health & Sanitation of the Virgin Islands Rules and Regulations.

- ❑ Follow cloth face covering guidelines:

- Staff members should wear cloth face coverings in a LICENSED camp facility, as well as outdoors if they are unable to maintain distances of six feet.
- Staff should wear, remove, and handle masks as per CDC guidelines.
- To prevent suffocation, cloth face coverings should NOT be placed on babies nor children under the age of 2.
- Provide staff with information on the proper use, removal, and washing of cloth face coverings.

Preventing the spread of **COVID-19** in a room

- ☐ Avoid touching eyes, nose, and mouth.
- ☐ Cover coughs and sneezes with tissue or inside the crook of the arm.
- ☐ If meals are served family-style, plate each child's meal to ensure multiple children do not use the same serving utensils. Avoid buffet style meals.
- ☐ Water and sensory group activities using beans, sand and playdough should be prohibited.
- ☐ Hand sanitizing products with 60 percent alcohol when handwashing with soap and water is not available. Hand sanitizers must be stored out of reach of children when not in use. Hand sanitizers should not be used for eating, preparing, or serving food.

Sanitation and hygiene practices

- ☐ Follow CDC guidelines – www.cdc.gov for cleaning and disinfecting recommendations.
- ☐ Use CDC recommended disinfectants and cleaning products with active ingredients against coronaviruses. Frequently clean and disinfect touched surfaces throughout the day and at night. Remember to regularly clean items that might not ordinarily be cleaned daily such as doorknobs, light switches, countertops, chairs, cubbies, and playground structures.
- ☐ Clean and sanitize all tools, supplies, and equipment before and after each child's use.
- ☐ Machine-washable soft toys should be washed often in warm temperatures per the manufactures recommendations and dried thoroughly (see manufactures labels). During the coronavirus outbreak consider removing soft toys that cannot be easily cleaned.

Sanitation and hygiene practices

- ☐ Clean and disinfect hampers and carts used for transporting laundry or equipment according to cleaning guidelines above for hard or soft surfaces.
- ☐ Allow sufficient time for cleaning between activities.
- ☐ Minimize use of shared supplies and label individual supplies and items.
- ☐ Routinely check and refill/replace hand sanitizers at entrances.
- ☐ Routinely check and refill/replace soap, and paper towels in bathrooms.



Advise those who have been excluded

- ☐ Persons experiencing mild **COVID-19** symptoms or think they may have contracted **COVID-19** should follow the Centers for Disease Control and Prevention recommendation to stay at home and call their doctor for medical advice (See [CDC.gov](https://www.cdc.gov) for the most current information).
- ☐ Anyone experiencing serious symptoms should seek medical attention immediately, by calling their doctor or 911. Serious symptoms can include trouble breathing, persistent pain or pressure in the chest, feeling confused



Advise those who have been excluded

Persons who believe they might have **COVID-19** or have been diagnosed with **COVID-19** should stay at home and separate themselves from others in the home. They should be prohibited from entering camp facilities until they can answer YES to all of the following questions:

- ✓ Has it been 10 - 14 days since your first symptom?
- ✓ Have you been without a fever for three days (72 hours)?
- ✓ Have your other symptoms of illness improved?
- ✓ Have you been tested for **COVID-19**?
- ✓ Have you received the results of your **COVID-19** test? Was the test result negative?

Have you traveled? ___ Yes ___ No

If you've traveled, did you self-quarantine (recommended time 10-14 days)

Household members and individuals who have been in close contact with persons displaying symptoms of **COVID-19** should self-quarantine by staying at home for 10-14 days, monitor themselves for symptoms of **COVID-19** and consult their local health department. Close contact means within six feet as per CDC guidelines.

For facilities planning to open or reopen after extended closure

- ❑ Refer to the following CDC guidelines at [CDC.gov](https://www.cdc.gov). Guidance for Schools and Child Care Programs at [CDC.gov](https://www.cdc.gov)
- ❑ Test water systems and devices to ensure safety.
 - Train all staff and communicate with families regarding the following:
 - Enhanced sanitation practices
 - Social distancing guidelines
 - Screening practices
 - **COVID-19** specific exclusion criteria
 - Make sure adequate supplies are available to meet cleaning requirements.

Stay informed

Stay informed about the **COVID-19** outbreak

- ☐ Know the signs and symptoms of **COVID-19** in children and adults. Children typically have milder cases than adults.
- ☐ Plan ahead in the event of recommended closure:
 - Consult with the environmental health specialist and local health department for guidance on cleaning, closure, potential exposures, and suspected cases.
 - A **LICENSED** camp facility may need to close if services cannot be provided due to lack of staff
 - Be prepared to communicate with staff and families about potential exposures.
 - Make sure adequate supplies are available to meet cleaning requirements.
- ☐ For more information, use the following resources: [CDC.gov](https://www.cdc.gov) or Department of Health (doh.vi.gov)

Daily Health Screening of Staff and Children for **COVID-19**

☐ Below are enhanced screening criteria for use during the **COVID-19** outbreak which differs from the standard exclusion criteria. However, standard exclusion criteria must still be followed as applicable. Persons responsible for screenings should maintain a six-foot distance while asking questions. Ask each staff member and person(s) dropping off children the following questions before they are permitted to enter the facility

Exclude anyone who answers YES to the following questions?

- Do you or any of the children you are dropping off have a fever*, cough, shortness of breath or difficulty breathing

Were you or any of the children you are dropping off in contact with anyone with a fever*, cough, shortness of breath, difficulty breathing, chills, new loss of taste or smell (vomiting or diarrhea)?

Since the last time you were here, were you or the children you are dropping off potentially exposed** to **COVID-19** or have reason to believe you or they were?

*Fever is determined by a thermometer reading 100.4 F/38 C or higher or by subjective signs such as flushed cheeks, fatigue, extreme fussiness, chills, shivering, sweating, achiness, headache, not eating or drinking.

☐ Ask staff if they are concerned, they may be at a higher risk for severe illness from **COVID-19*****

Screen children and staff by:

- ☐ Visually inspect persons for signs of infection such as flushed cheeks, fatigue, or extreme fussiness.
- ☐ Conduct temperature screenings using the procedures on slide
- ☐ Record temperature and any symptom on a daily health screening log

Health screenings should be repeated periodically throughout the day on staff and children to check for new developing symptoms.

Temperature protocol if facility chooses to take temperatures:

- CDC temperature screening guidelines
 - ❑ Individuals waiting to be screened should stand six feet apart from each other. Use tape on the floor for spacing.
 - ❑ Staff members conducting temperature checks should wear cloth face coverings and remain six feet apart from the individual up to the point of and after taking their temperature.
 - ❑ Use touchless aka sensor thermometers if available. If not, use tympanic (ear), or temporal (forehead) thermometers. Use disposable thermometer covers after each use
 - ❑ Do **NOT** take temperatures orally (under the tongue) because of the risk of spreading **COVID-19** from respiratory (mouth) droplets.



If using the facility's thermometer

- ☐ Wash hands or use hand sanitizers before touching thermometers.
- ☐ Wear and dispose of gloves between direct contact with individuals.
- ☐ Use disposable thermometer covers.
- ☐ Clean and sanitize thermometers according to manufacturers' instructions between each use.
- ☐ Wash hands or use hand sanitizers after removing gloves and between direct contact with individuals



Contact Sport Guidelines

There are a number of actions youth sports organizations can take to help lower the risk of COVID-19 exposure and reduce the spread during competition and practice. The more people a child or coach interacts with, the closer the physical interaction, the more sharing of equipment there is by multiple players, and the longer that interaction, the higher the risk of COVID-19 spread. Therefore, risk of COVID-19 spread can be different, depending on the type of activity. The risk of COVID-19 spread increases in youth sports settings as follows:

Lowest Risk: Performing skill-building drills or conditioning at home, alone or with family members.

Increasing Risk: Team-based practice.

More Risk: Within-team competition.

Even More Risk: Full competition between teams from the same local geographic area.

Highest Risk: Full competition between teams from different geographic areas.

If organizations are not able to keep in place safety measures during competition (for example, maintaining social distancing by keeping children six feet apart at all times), they may consider dropping down a level and limiting participation to within-team competition only (for example, scrimmages between members of the same team) or team-based practices only. Similarly, if organizations are unable to put in place safety measures during team-based activities, they may choose individual or at-home activities, especially if any members of the team are at high-risk for severe illness.

Assessing Risk

The way sports are played, and the way equipment is shared can influence the spread of **COVID-19** among players. When you are assessing the risk of spread in your sport, consider:

Physical closeness of players, and the length of time that players are close to each other or to staff. Sports that require frequent closeness between players may make it more difficult to maintain social distancing, compared to sports where players are not close to each other. For close-contact sports (e.g., wrestling, basketball), play may be modified to safely increase distance between players.

For example, players and coaches can:

- focus on individual skill building versus competition;

- limit the time players spend close to others by playing full contact only in game-time situations;

- decrease the number of competitions during a season.

Coaches can also modify practices so players work on individual skills, rather than on competition. Coaches may also put players into small groups (cohorts) that remain together and work through stations, rather than switching groups or mixing groups.



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Thank You!