

# SB2W Communicable Disease Plan (CDP)

The health & safety of our campers and staff are a top priority each summer. For this reason, it is imperative that we do everything we can to avoid any sort of viral outbreak, and that we be well-prepared just in case. SB2W's Communicable Disease Protocols are outlined below. These protocols represent our standard operating procedure. They are intended to augment our Medical Clinic protocols and standing orders. There are two primary components: Prevention and Response

## PREVENTION

Primary objective is limit possibility of communicable illness finding entry into camp and provide ongoing mitigation.

### PRE-SUMMER

- Each Spring, Director will evaluate order supply of protective equipment: gloves, masks, face/eye shields for medical clinic.
- Identify CDP Team responsible for critical services & conduct training prior to start of camp. CDP Team will include Director, Assistant Director, Facilities Manager, Head Cook and Medical Clinic staff.

### STAFF RESPONSIBILITIES BEFORE CAMP

We look to staff to make sure they are ready health-wise to serve at camp. We recommend the following:

- In the 7 days prior to departing for camp, staff will be required to take temperature EACH DAY. Any person registering a fever in any of the 7 days prior to their anticipated departure for camp may potentially have a communicable disease.
- If a staff person registers a temperature of 100 degrees F or higher, it is best to be evaluated by their physician, and immediately notify the camp of the concern.
- If, after physician's testing, it is determined that a staff person has a communicable disease, they **MUST REMAIN AT HOME** until their physician declares them to be of no threat to others. A discussion with the Camp Director will determine when they will be able to come to camp.
- Even if the illness is not a communicable disease, no one should come to camp until they are symptom free and healthy for at least 24 hours. Again, a discussion with the Camp Director is required.

### PARENT RESPONSIBILITIES BEFORE CAMP

We look to parents to make sure their children are ready health-wise for the camp experience. We recommend the following:

- In the 7 days prior to departing for camp, please take your child's temperature EACH DAY. Any child registering a fever in any of the 7 days prior to their anticipated departure for camp may potentially have a communicable disease.
- If your child registers a temperature of 100 degrees F or higher, have your child evaluated by his/her physician, and immediately notify the camp of your concern.
- If, after physician's testing, it is determined that the child has a communicable disease, the camper **MUST REMAIN AT HOME** until the child's physician declares the child to be of no threat to others. A discussion with the Camp Director will determine when the child will be able to come to camp.
- Even if the illness is not a communicable disease, no child should come to camp until they are symptom free and healthy for at least 24 hours. Again, a discussion with the Camp Director is required.

### CAMP PROTOCOL ON OPENING DAY

- Upon arrival, two questions will be asked by staff:
  - 1 - "Has ANYONE (adults, campers, siblings) had any illness in the last 5 days - any nausea, diarrhea, vomiting, fever, chills, muscle aches, rash, or cough that is unusual for them?"
  - 2 - "Has ANYONE (adults, campers, siblings) had a KNOWN exposure to someone with a communicable disease in the past 10 days?"

If the answer to either question is YES, then detailed information will be gathered, a more comprehensive exam (including temperature check) will be conducted. If a camper arrives displaying a

fever or other flu-like symptoms, parents will likely be asked to take the child home for further evaluation, and to not return the child to camp until he/she is symptom-free & healthy for at least 24 hours; others who answer YES to the questions above may also be asked to leave the grounds.

- A lice head check will also be conducted
- Prescription medications will be collected at the medical clinic, so be sure to have completed medication administration forms along with the medications in their original containers.

#### PREVENTION THROUGHOUT THE SUMMER

During pre-camp staff training and opening day meetings, staff members will be trained in and reminded about the specifics of communicable disease prevention.

- Hand washing facilities & alcohol-based hand sanitizers will be available at numerous locations throughout camp. Reminders and instruction on safe coughing practices and appropriate hand washing procedures will be incorporated into the daily life & culture of camp.
- Kitchen Crew will disinfect all public bathrooms and additional “high contact” areas around camp each day. Counselors and campers in each cabin will thoroughly clean their cabin each day.
- Regular cabin inspections will be conducted, and additional staff training & camper reminder strategies will be implemented through the summer.

#### RESPONSE

Primary objectives are three-fold: (1) Support the recovery process for those that are ill, (2) Emphasize behaviors that will break the chain of communicability, and (3) Keep key people informed.

#### INDIVIDUAL TREATMENT PROTOCOL

- Anyone experiencing symptoms that would suggest a communicable disease will be immediately separated from the general camp population.
- Illness and Length of Quarantine: As a rule, campers who have a contagious illness need to be isolated for 24 hours after the resolution of symptoms and fever. When a camper is isolated, clinic staff should be in touch with parents regarding care. Because of the nature of a specific virus, there may be times when a camper needs to be isolated for a longer time period. Depending on the severity or timing of the illness, it might be best for a camper to be picked up early. That decision should be made in collaboration with parents and the Camp Director.
  - Here’s a list of the isolation requirements for the most common illnesses seen at camp:
    - Strep throat - camper may return to their cabin 24 hours after beginning an antibiotic.
    - Pink Eye (Conjunctivitis) - A camper diagnosed with bacterial conjunctivitis may return to their cabin 24 hours after beginning an antibiotic and there is no more drainage. Viral conjunctivitis is contagious up to 14 days. A decision to send a camper home will be made in collaboration with parents and the Camp Director.
    - COVID-19 – camper must be isolated and sent home with family. Family will be encouraged to self-quarantine at home for 14 days.

#### INITIATING CDP INTERVENTIONS

- In order to Minimize the potential to be “surprised” by an outbreak. Instruct Medical Clinic staff to alert camp administration when five people present with similar symptoms within a given time period (3-4 hours). This is tipping point for launching CDP interventions and is especially important when the symptoms are gastro-intestinal in nature.
- Support Medical Clinic needs by making sure Medical Clinic personnel get adequate food, sleep and breaks. Consider adding extra help, including during the night.
  - Consider how the illness is passed from person to person; implement strategies to minimize the potential that caregivers will also get ill.
  - Allow Health Center staff to focus on their essential services (e.g., passing daily medications); arrange for others to assume non-essential services (e.g., cabin sanitation checks) or temporarily suspend these.
- Food Service:
  - Designate a person to coordinate Medical Clinic needs with kitchen personnel.
  - Determine how meals get to and from the Medical Clinic and how the kitchen will know

the number of meals needed. Stock the Medical Clinic with food classically associated with illness (e.g., saltines, chicken noodle soup, 7-Up™); consider the benefits of using disposable plates and silverware.

- Campers and Staff:
  - As more people get ill, it may be necessary to divert counseling staff to assist in the Medical Clinic. Consider the impact on programming and the flexibility of reassigning staff.
  - Discuss how campers and staff will be updated about the outbreak, the frequency of this update, and who will deliver it.
- Communication:
  - Director and Medical Clinic staff will coordinate how and by whom parents will be informed of their child's health status; Medical Clinic record-keeping system will capture this information exchange. Consider providing parents with a designated phone number should they have need for immediate information about their child.
  - Director should notify public health officials, when required
  - Director should be prepared to handle inquiries from media.
- Terminating CDP Interventions:
  - Assuming control measures were effective, the number of new cases will eventually start to wane. Director will consult with medical clinic staff and, if necessary, a communicable disease specialist, to determine how long control measures should be kept in place. Careful consideration will be given to ensure we aren't assuming an outbreak is over only to have it re-emerge because controls were terminated too soon.

#### OUT-OF-CAMP TRIPS

When campers and staff take out-of-camp trips, itineraries will be planned to minimize contact with those from the general community and all trip participants will be reminded regularly of proper health & safety practices.

#### COVID-19 CONSIDERATIONS

The pandemic of Cov-Sars-2 requires special consideration for the 2020 summer season and beyond. Please note: Preventative pre-screening will be 14 days prior to camp.

#### Isolate and Transport Those Who are Sick

- Immediately separate staff or campers with COVID-19 symptoms (such as fever, cough, or shortness of breath) at camp. Individuals who are sick should go home and or to a healthcare facility depending on how severe their symptoms are, and follow [CDC guidance for caring for yourself or others](#) who are sick. Families of camper with symptoms would immediately go home.
- Staff and/or campers who have had [close contact](#) with a person who has symptoms will be separated and sent home as well, and follow [CDC guidance for community-related exposure](#). If symptoms develop, families should follow [CDC guidance for caring for oneself and others](#) who are sick. CDC defines close contact as "<6ft for a prolonged period of time." CDC qualifies period of time by stating "Recommendations vary on the length of time of exposure, but 15 min of close exposure can be used as an operational definition."
- In accordance with state and local laws and regulations, camp director will notify local health officials, staff, and families immediately of any case of COVID-19 while maintaining confidentiality.

#### CONCLUSION

Our success in keeping a communicable disease from entering camp begins with parents' diligence and assessment of your child's health in the week prior to coming to camp. We cannot think of anything more disappointing than having to tell your child that his/her departure for camp has to be delayed because of illness. We are counting on parents to help us by serving as the first line of defense. Clearly if a child is ill, the place they will be most comfortable is in parents' care in their own home.

We will monitor the local Health Department data to keep track of what is happening throughout our area, and we'll do everything possible as the summer progresses to update parents and families promptly with any necessary information. It is our hope that with heightened and diligent hygienic practices and a camp-wide awareness of communicable disease detection and prevention, we can avoid significant exposure and enjoy a healthy & happy summer.