



COVID-19 Health & Safety Guidelines

Overnight Camps

June 8, 2021

Table Of Contents

[Executive Summary](#)

[Introduction](#)

[Infection Prevention and Exposure Control Measures](#)

[Camp Population](#)

[Households](#)

[Camper Accommodation](#)

[Physical Distancing and Minimizing Physical Contact](#)

[Camp Personnel](#)

[Staff Responsibilities](#)

[Staff Training](#)

[Staff Housing](#)

[Camp Facility](#)

[Outdoor Spaces and Ventilation](#)

[Physical Markers and Barriers](#)

[Cleaning](#)

[Health and Safety](#)

[Illness Policies](#)

[Record Keeping](#)

[Restricted Gathering Size](#)

[Visitors, Parents, and Caregivers](#)

[Visitors](#)

[Camper and Parent or Caregiver Education](#)

[Drop-off and Pick-up](#)

[Program and Operations](#)

[Program Activities](#)

[Transportation](#)

[Food Service](#)

[First Aid](#)

[Health Checks and Responding to Symptoms](#)

[Pre-Camp & Daily Health Check](#)

[Staying Home and Self-Isolation](#)

[What To Do When Symptoms Develop At Camp](#)

[Finding, Tracing, and Managing Outbreaks](#)

[Personal Health Practices](#)



[Hand Hygiene](#)

[Respiratory Etiquette](#)

[Personal Protective Equipment \(PPE\)](#)

[Non-Medical Masks and Face Coverings \(Masks\)](#)

[Gloves](#)

[Face Shields](#)

[Emergency First Aid PPE](#)

[Appendix A: When to Perform Hand Hygiene at Camp](#)



Executive Summary

Dr. Bonnie Henry announced on May 27, 2021 what children, families, and the camp community longed to hear. The Provincial Health Officer Order would be amended in the following days to allow overnight camps for children and youth to happen ([Listen](#) at 3:40). The BC Camps Association is grateful for the assistance of the Office of the Provincial Health Officer, the BC Centre for Disease Control *Safer Operations Working Group*, and the camp directors and board members who contributed to the development of the guidance and conditions that make the return of overnight camps possible.

This summer at camp, campers will develop bonds of friendship, gain independence, try new activities, laugh and sing, grow in their faith, and surely they will celebrate a return to a childhood rite of passage that is camp. However, it is not camp as usual. The specific conditions outlined in this document may require modifications to camp programming, implementation of new health and safety routines, and administrative changes that may even necessitate a reduction in the overall number of campers per session. We acknowledge and regret that some camps may not be able to meet all of these conditions and will join those camps that will not operate this summer or will choose to run day camps instead.

General principles for safe overnight camp operation this summer include:

- Strongly encouraging all staff and campers to be vaccinated against COVID-19.
- Spending as much time outdoors as possible.
- Utilizing well ventilated indoor spaces with windows and doors open to allow fresh air circulation.
- Frequent hand hygiene.

Outdoor Spaces

- No masks required.
- Campers from different [households](#) can interact.
- No group size limits.
- High energy group games and activities.
- Minimal physical contact between households.
- Eating within households and no spacing restrictions.
- Singing outdoors is allowed.

Indoor Spaces

- Campers do not have to wear masks in their cabin or indoor spaces with just their household.
- Campers do not have to wear masks in well ventilated shared indoor spaces where there is sufficient space for distancing between households.
- Masks are to be worn in vehicles, in common spaces with other households when distancing is not possible, and in poorly ventilated indoor spaces.
- Households can eat together indoors with 2 metre spacing between households.
- No singing indoors.

The BCCA exhorts all camps in BC operating overnight camps this summer to follow the conditions in this guidance and to uphold best practices in child and youth camping.



Introduction

The British Columbia Camps Association (BCCA) is a governing body that facilitates and promotes an in-depth Accreditation process, informs and educates its membership of camping professionals, and advocates the benefits of Accredited camps to parents and the BC public. The BCCA is composed of over 50 camps across British Columbia, including agency, religious, not-for-profit, and private camps. We believe that safe and quality camp experiences play an integral part in the development of children, youth, and adults and contribute to healthy communities. We are a proud affiliate of the Canadian Camping Association.

This document was developed by the BCCA in collaboration with the Office of the Provincial Health Officer (PHO) and the BC Centre for Disease Control (BCCDC) to provide guidance to overnight child and youth camps to prevent the transmission of COVID-19. The PHO has clarified that the [BC's Restart Plan](#) public health guidance does not apply to camps because many campers are under 12 years of age, therefore not eligible for vaccination. The PHO supports overnight camps to return this summer, however believes that a conservative approach is appropriate to minimize the risks of disease transmission, clusters, and outbreaks.

These guidelines were originally written specifically for BCCA Accredited camps as a supplement to the [BCCA 2021 Accreditation Standards](#). It is expected that all camps providing overnight child and youth camps follow WorksafeBC policies, hold the necessary environmental health permits, and operate within accepted industry standards. Non-accredited camps should familiarize themselves with the BCCA Accreditation Standards as to generally accepted management and human resources, facilities, health and safety, and activity programming best practices in child and youth camping. **These guidelines will be updated as required and it is the camp's responsibility to stay up to date.**

Camps are incredibly diverse in terms of their size, type of organization, mission, operating season, and activities and it isn't possible to write guidelines that apply perfectly in all situations. Camps may also provide services such as family programs, accommodation and meal service, rentals, and other activities covered by other sector-specific guidelines. When a guideline does not quite fit your circumstances we recommend speaking with your local health officer and thinking critically to put the well-being of your camp community first.

Camps must develop their own COVID-19 Safety Plan and submit it to their local medical health officer (MHO) for review and send a copy to the BCCA. MHOs may not have time to review the COVID-19 Safety Plan before camps begin. Camps must be prepared to receive feedback and implement necessary changes after operations commence.

Contact emails for submitting plans for camps in the following regions are:

Island Health: TBA

Vancouver Coastal Health: TBA

Fraser Health: TBA

Interior Health: TBA



Northern Health: TBA

BCCA: info@bccamping.org

Additional Resources

- BC Centre for Disease Control: [COVID 19 Information](#)
- Government of BC: COVID-19 [Orders, Notices and Guidance](#)
- Government of BC: [BC's Response to COVID-19](#)
- Worksafe BC: [COVID-19 Information and Resources](#)

Infection Prevention and Exposure Control Measures

Managing the risk of COVID-19 requires multiple layers of protection to be effective. The first and most important step to reduce the risk of COVID-19 transmission at camp is to implement policies to ensure that those who are sick are not entering the camp, and that those who become sick in camp are managed appropriately. At camp the focus should be on being outdoors, reduced crowding, ventilation of indoor areas, use of masks when necessary, hand hygiene, and cleaning and disinfection of surfaces touched by many people.

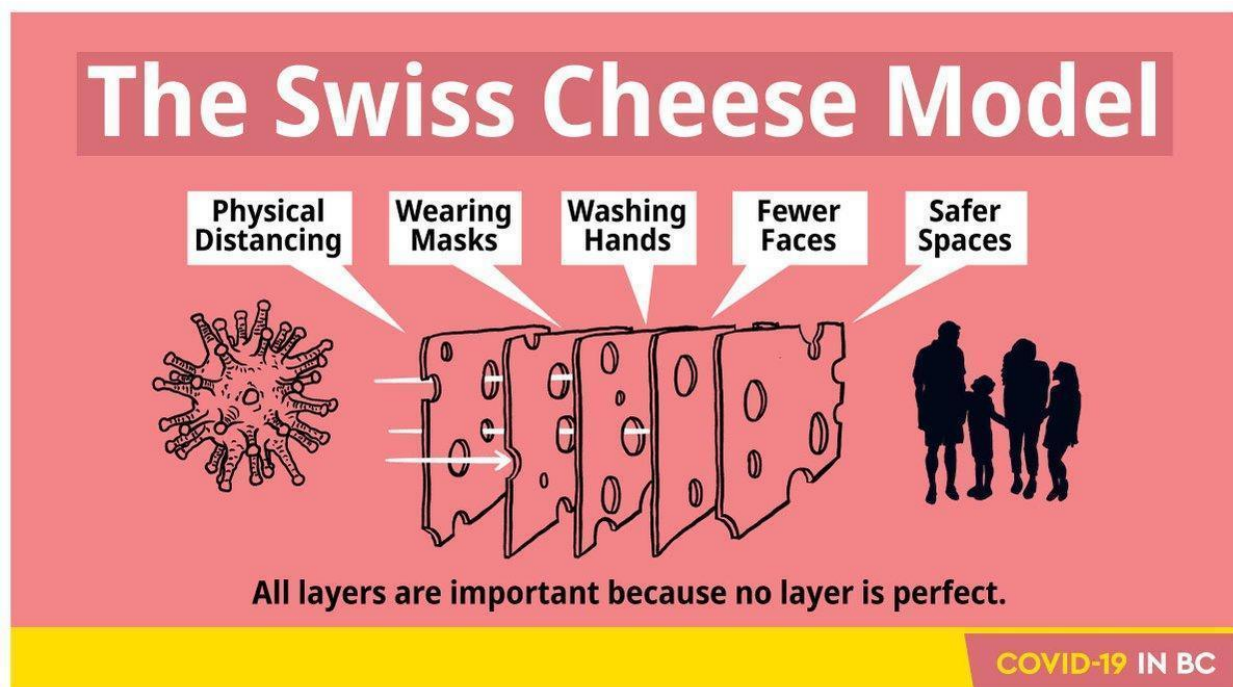
Camps should strongly encourage all eligible campers and staff to be vaccinated at least two weeks prior to the camp session per [BCCDC guidelines](#).

Infection prevention and exposure control measures help create safe environments by reducing the spread of communicable diseases like COVID-19. These are more effective in settings such as camps where there is a relatively consistent grouping of people and multiple layers of protection can be routinely implemented, including:

- Robust illness policies for campers and staff.
- Various health and safety measures taken by the camp (e.g. using outdoor space for activities, enhancing ventilation of indoor spaces, implementing staggered schedules, enhanced cleaning and disinfection of highly touched surfaces, etc.).
- Reinforcement and adoption of effective personal practices (e.g. hand hygiene, respiratory etiquette, wearing masks when required, etc.).

A layered approach to infection prevention and exposure control should be taken to reduce the transmission of COVID-19 in camps. When multiple layers of protection are in place, the approach is more likely to be effective if any one layer of protection fails. Some layers of protection rely on camp policies and practices, while others rely on individual behaviours of campers and staff. When many layers are combined, the risk of COVID-19 is substantially reduced.





- Physical distancing between [households](#) is an important layer because COVID-19 spreads through close contact. This can be done by conducting activities outdoors, adapting group activities to minimize physical contact between households indoors, establishing occupancy limits for indoor spaces, staggering meeting times and mealtimes, rearranging activity spaces (e.g. arts & crafts room), or other means.
- Indoor spaces with inadequate ventilation pose a higher risk of COVID-19 transmission. Activities outdoors are best. When indoors, open doors and windows to improve ventilation with fresh air. Reduce indoor crowding. If done well, the need for masks indoors can be limited to specific situations.
- Wearing masks in closed spaces with poor ventilation is another layer of protection. Masks should be required in enclosed spaces (e.g. buses) when the space cannot be well-ventilated for campers in Grade 4 and older (9 years old as of December 31, 2021) and for staff during activities and situations where they are interacting in close proximity to others. Camp staff must ensure that masks are [used](#) correctly. Students in Grades K to 3 are encouraged to wear a mask in enclosed spaces but are not required to do so - mask wearing remains a personal or family/caregiver choice for these campers, and their choices must be respected.
- Other layers include effective cleaning and hygiene practices, such as [handwashing](#), [cough hygiene](#), and [cleaning and disinfecting](#) of surfaces and objects touched by many people. Camps should make explicit efforts to encourage hand hygiene and cough/sneeze hygiene.

1. Camp Population

1.1. Households

Campers are divided into households to reduce the number of close contacts. A camper's household is the people they share a sleeping space with and should not be more than 14 people total (e.g. 12 campers and two staff). This household will reflect their inner circle of contacts for tracing purposes. The composition of households should remain consistent during the camp session.

The household model should be implemented for tracing and to ensure that higher risk activities are done only in small groups of consistent people. This includes sleeping, dining, and indoor programming. Specifically:

- Campers/staff will sit exclusively with members of their household when dining.
- Campers/staff will engage exclusively with members of their household when participating in indoor programming.
- More than one household may be in an indoor program or dining facility at one time provided windows/doors to the outdoors are open and it is well ventilated, all persons are adhering to occupancy limits, and different households are physically distancing from each other.

Outdoor activities will be prioritized and interactions between households can occur. Specifically:

- Campers/staff in different households can engage in outdoor socializing provided that gathering limits are being adhered to.
- Campers in different households can engage in outdoor activities provided that gathering limits are being adhered to.

1.2. Camper Accommodation

Living accommodations (cabin, tent, or bedroom) can be shared amongst members of a single household.

- Ventilation should be optimized by use of screen doors, screened windows, etc.
- Cabin access will be limited only to the campers/camp leaders who reside in that cabin (i.e., members of the household) and cleaning staff who will only enter when no campers/camp leaders are present. Cleaning staff will be required to wear PPE.
- Masks do not need to be worn by members of the household when in their accommodation.
- Where buildings have shared spaces between households, masks will be worn in common spaces if they do not have windows and/or doors that can be left wholly or partially open to the outdoor air.
- Sleeping accommodations shared by households should provide a 1 metre physical distance between the heads of individuals, or if heads cannot be 1 metre apart, temporary barriers may be used (curtains, sheets).
- For bunk beds, position the head of the camper in the top bunk opposite the position of the camper in the bottom bunk.
- For side-by-side beds, position the campers head-to-toe.
- For end-to-end beds, position the campers toe-to-toe where possible, and otherwise head-to-toe to maximize distance between heads.



1.3. Physical Distancing and Minimizing Physical Contact

- Outside of households, physical distancing should include avoiding physical contact, minimizing close, prolonged, face-to-face interactions, and spreading out as much as possible within the space available.
- If campers from different households will be in the same indoor space for an extended period of time (e.g. more than 15 minutes), the space should be sufficiently large, well ventilated, and should have posted occupancy limits to prevent overcrowding between households.
- Staff should remain with their household as much as is practicable and feasible.
- The number of staff interacting with each household should be minimized to the greatest extent possible.
- Avoid greetings which require physical contact (e.g. high fives, handshakes, hugs).
- Further guidance for maintaining physical distancing between households during camp is found in [Programs Activities](#).

2. Camp Personnel

2.1. Staff Responsibilities

Staff often serve in multiple roles at camp and can interact with multiple groups of households when outside.

When inside, staff are always required to wear masks except when in their cabin/housing unit. This is especially important if they are interacting with people from outside their household. Masks are not required to be worn outdoors.

- Staff may come together for training purposes but the camp should seek to reduce the number of close face-to-face interactions and mask wearing is required indoors.
- Summer staff should be encouraged to remain on site for the duration of camp programming to limit outside interactions. When away from camp they must continue to follow all current public health guidance.
- Non-resident staff will avoid close interactions with campers or resident staff and must follow current public health guidance.
- Staff are expected to follow all current public health guidance during their time off.
- All staff are required to be trained and aware of the best practices to follow to mitigate the spread of disease during their time working and/or living at camp.

2.2. Staff Training

- In addition to the training normally received, staff must receive training on all COVID-19 related policies and procedures.
- Staff who will be responsible for cleaning with or mixing chemicals be sure staff are certified in WHMIS or adequate training is given.
- Camps should consider if staff training can be done virtually when possible and appropriate.



2.3. Staff Housing

Camp staff are allowed to be accommodated on site so long as the following criteria are met:

- Where buildings have shared indoor spaces between non-household individuals, masks will be worn in common spaces.
- Arrange shared accommodations for individuals in the same household in such a fashion that beds are at least 2 metres apart and head-to-toe where possible. If beds cannot be at least 2 metres apart, use temporary barriers between beds, such as curtains, to prevent droplet spread while sleeping, and sleep head-to-toe.
- None of the residents in a shared accommodation can be ill or meet a criterion that requires isolation facilities. If a resident is ill and meets a criterion that requires isolation, all residents in the affected accommodation building are to be isolated and sent for testing. If the staff's COVID-19 test comes back as positive, they are to go home. If this is not feasible, staff are to self-isolate on site until well.
- [PPE guidance](#) should be followed in staff housing when relevant.

3. Camp Facility

3.1. Outdoor Spaces and Ventilation

- Conduct activities outside whenever possible. Outdoor programming is strongly encouraged.
- If a program or activity must occur indoors, ventilate the space as much as possible (e.g. keep windows and doors open).
- Playgrounds are considered a safe environment if appropriate hygiene practices (e.g. handwashing) are supported.

3.2. Physical Markers and Barriers

- Install markers (e.g. tape, cones, etc.) to give guidance to campers in settings where they must wait their turn or were previously allowed to gather as a large group.
- Consider installing physical barriers (e.g. plexiglass) where appropriate (e.g. food service).
- Well ventilated indoor areas and physical distancing between households will limit the need for use of masks. Masks should be used in closed spaces with poor ventilation. The use of masks indoors does not mean that other protections, such as limiting access to the camp, maintaining physical distancing, and barriers are no longer necessary.
- Post appropriate signage reminding staff and campers of guidelines or indicating off limits areas. [BCCDC Signage](#).

3.3. Cleaning

Regular cleaning of surfaces and objects that are touched by many people is another layer of protection to prevent the transmission of COVID-19. Camp facilities should be cleaned in accordance with the [BCCDC's Cleaning and Disinfectants for Public Settings document](#). Exposure of children to potentially harmful cleaners should be minimized by product selection and scheduled cleaning times.

- Buildings should be generally cleaned daily. Cleaning is the physical removal of visible soiling (e.g. dust, soil, blood, mucus). Cleaning removes and weakens viruses and bacteria. It is done



with water, detergents, and steady friction from a cleaning cloth. Cleaning once a day is usually enough to remove any virus on surfaces and help maintain a healthy facility. Disinfection should be used when a sick person has been in contact with the surface.

- High contact surfaces may need to be cleaned more regularly, especially in areas that children use. High contact surfaces include door handles, light switches, hand railings, toilet handles, shared office equipment, sports equipment, appliances, and self-serve beverage stations.
- For cleaning, use water and detergent (e.g. liquid dishwashing soap), or common, commercially available cleaning wipes, along with good physical cleaning practices (i.e. using strong action on surfaces).
- For disinfection, use common, commercially available disinfectants such as ready-to-use disinfecting wipes and pre-made solutions (no dilution needed). Refer to the [Cleaning and Disinfectants for Public Settings Guidelines](#) for additional information.
- Empty garbage containers daily.
- Complete appropriate hand hygiene after cleaning.
- Wash hands before and after wearing gloves.
- Adequate hand-washing stations must be provided.

4. Health and Safety

4.1. Illness Policies

- Ensure that the camp has flexible sick-leave and absence policies that discourage staff from reporting to work while sick.
- Ensure the camper refund policy is clearly communicated to all camper families, including any changes relating to absences due to COVID-19 related symptoms. When possible, camps should consider a flexible refund policy that will discourage a sick child attending camp.

4.2. Record Keeping

In the event of illness, contact tracing will be an important activity. Prepare contact lists by camp session, cabins, or small groups (for close contacts) in advance and keep up to date at all times. These may be needed after campers have returned home to support notification of exposures.

Keep records of:

- Any occurrence involving campers or staff becoming symptomatic at camp.
- Schedules and where each camper was during the day.
- Transportation conducted by the camp, including vehicle passenger lists and seating assignments.
- Any outside visitor to the camp (parents, trades workers, delivery drivers, etc.).
- These records must be kept for a minimum of 30 days after the completion of the camp.

4.3. Restricted Gathering Size

The BCCDC [Guidance for Summer Day Camps](#) states the Provincial Health Officer's Order on [Gatherings and Events](#) does not apply to camps as long as campers and staff are not all in one area and



if they are able to practice physical distancing as much as possible. Large indoor assemblies of staff and campers should not be held.

For events outside of day or overnight camp programming as outlined in this guideline:

- Events larger than the number allowed by the PHO will not occur. Events that can be held are outlined in the [Gatherings and Events Order](#) and are subject to additional restrictions. Camp settings are permitted to host events under this Order. Please see the Order for additional information.
- Gatherings of fewer than the number allowed by the PHO for a singular event may be hosted at the camp indoors or outdoors, provided that physical distancing between attendees/households is possible.

5. Visitors, Parents, and Caregivers

5.1. Visitors

Parents, caregivers, volunteers, delivery persons, contractors, and other non-staff (e.g. visitors) entering the camp should be limited to those supporting activities that are required for the benefit of campers and the required maintenance of camp facilities.

- All visitors should provide active confirmation (e.g. sign in at entry, e-mail before entry, etc.) that they have no symptoms of illness and are not required to self-isolate before entering.
- Camps must keep a list of the date, names, and contact information for all visitors who enter the camp.
- All visitors should wear a mask in accordance with current public health guidance.

5.2. Camper and Parent or Caregiver Education

- Make sure that campers and their parents or caregivers are educated on all COVID-19 related policies and procedures relevant to their camp program through a combination of the registration process, pre-camp communications, on site lessons, signage, and other forms of communication.
- Be clear and concise with expectations for campers, parents, and caregivers.
- Be aware that frequent reminders for campers, particularly younger ones, will be necessary.

5.3. Drop-off and Pick-up

- Drop-off pick-up at the beginning and end of a session should occur outside and as close to the entrance to the property as possible. Face coverings are required indoors.
- When possible, plan for pick-up and drop-off procedures where the parents or caregivers are not required to get out of their vehicles.
- Stagger pick-up and drop-off times.
- If possible, use multiple pick-up and drop-off locations.
- A health screening at drop-off may be conducted by asking parents and caregivers to confirm that their child does not have any symptoms relating to COVID-19.
- If a sign in/out sheet is used, camps should provide pens to be sanitized between uses. Parents and caregivers should practice hand hygiene before and after touching the sign in/out sheet.



Alternatively, camp staff may sign in/out the campers by verbally receiving the necessary info from the parent or caregiver.

6. Program and Operations

6.1. Program Activities

- Facilitate all activities outside whenever possible (e.g. arts and crafts, snack time, etc.).
- Have foul weather contingency plans within households if possible. Shared indoor spaces should be sufficiently large, well ventilated, and should have posted occupancy limits to prevent overcrowding between households. 4 square metres per person is a reasonable divider for occupancy.
- Choose or modify activities so that they minimize physical contact. Do not schedule high contact games or sports.
- Shared equipment must be cleaned daily (e.g. bows and arrows).
- Create multiple activity spaces within your facility to facilitate the reduced number of campers in a group (e.g. set up 2 or 3 areas for crafts).
- Free time blocks that occur inside must be scheduled to prevent contact with campers outside of their household. Members of different households can interact outdoors.
- The risk of COVID-19 transmission is increased when people are singing together in-person.
 - Singing is only allowed outdoors.
 - Avoid sharing equipment; if sharing must occur, clean and disinfect between users.
- Relevant activity-specific guidance may be found at the following links. It is important to remember that these may no longer reflect current public health guidance and the principles of vaccination for all eligible people, outdoor spaces, no crowding, and good hygiene are the primary layers of protection.
 - Challenge Courses: [ACCT](#) for operation and equipment cleaning.
 - Climbing Wall: WorksafeBC protocols for [Climbing Walls](#).
 - Swimming: [Lifesaving BC for pool and waterfront operations](#).
 - Equestrian: [Equestrian Canada: COVID-19 Return to Business Operations Framework](#).
- Camps providing backcountry/wilderness out-trips must adapt these guidelines and comply with the Out-Tripping standards in the [BCCA 2021 Accreditation Standards](#).

6.2. Transportation

- Group transport should be for unavoidable transport only, not recreational travel.
- If group transportation is necessary, sanitation, appropriate PPE, and physical distance must be maintained.
- Masks must be donned by passengers in Grade 4 (9 years old as of December 31, 2021) and over prior to boarding vehicles or vessels and hand sanitizer must be provided before loading and after unloading. Please refer to [Transport Canada](#) for information for commercial drivers.
- Consider installing physical barriers (e.g. plexiglass) for the driver.
- On buses, if space is available, each passenger should have their own seat, unless they are from the same household. If 15 passenger vans or other non-commercial vehicles are being utilized for camp transports, alternate seats and space passengers appropriately.



- Vehicles must be cleaned and disinfected according to the guidance provided in [BCCDC's Guidelines on Cleaning and Disinfectants for Public Settings](#) document. Additional guidance is available from [Transport Canada](#).
- Passengers must sanitize or wash their hands before loading the vehicle.
- Load back to front, offload front to back, and assign seating.
- Loud talking or singing in enclosed spaces like vehicles is not allowed.
- If camps are using contracted transportation providers, they should contact the service provider to ensure that appropriate measures are in place for physical distancing, cleaning and sanitization, and their general COVID-19 procedures.

6.3. Food Service

Food service to campers and/or staff must ensure the following:

- Food services must adhere to current WorksafeBC guidance for restaurants, cafes, and pubs.
- [Food Safety Legislation](#) continues to apply as relevant.
- Self-serve food and beverage stations are permitted under the [Food and Liquor Serving Premises Order](#), however camps should only provide self-serve options if campers are capable of following hand sanitizing and physical distancing guidance. If there is a self-serve food or drink station:
 - Hand washing facilities or alcohol-based sanitizers must be within easy reach of the station.
 - Signs reminding patrons to wash or sanitize their hands before touching self-serve food, drink or other items, must be posted at the self-serve station.
 - High touch surfaces at the station, and utensils that are used for self-serve, must be regularly cleaned and sanitized.
- All persons will practice proper hand hygiene upon entry to the dining hall and after eating.
- More than one household can be in the dining hall at the same time and each household will sit at their own table.
- Households must be spaced 2 metres apart from each other.
- Food distribution should ensure there is no gathering or crowding of campers and staff.
- Food can be served family-style, by staff-assisted buffet or pre-plated.
- When possible, serve meals and snacks outside.
- Singing is not permitted in the dining hall. Loud talking between households should be avoided.
- Camps should emphasize that food and beverages should not be shared.
- Campers and staff should be encouraged to bring an individual water bottle or other beverage container to camp for their personal use to support hydration needs.
- Refilling stations can be used to refill personal containers. These should not include bathroom sinks or other water sources not typically used for drinking water.

6.4. First Aid

- The FA attendant and patient should wear masks while care is being provided.
- When possible, the FA attendant should guide the patient to do their own first aid (e.g. an older camper could put on their own band-aid).
- Use approved procedures, mask, gloves, and eye protection for all first aid applications. See [PPE measures](#).



- If CPR is required, use a pocket mask with a viral filter or a bag-valve-mask with an HME filter to protect the first aider from possible infection. See section [PPE measures](#).
- This [WorksafeBC information sheet](#) provides information to employers and occupational first aid attendants on safely treating patients during the COVID-19 pandemic. It provides additional precautions to first aid attendants on following the public health directives—including physical distancing, hand hygiene, and sanitization—while treating a patient.
- LifeSaving Society COVID-19 recommendations are available [here](#).

7. Health Checks and Responding to Symptoms

7.1. Pre-Camp & Daily Health Check

In the week leading up to camp families are asked to monitor their camper(s) for the symptoms listed below. Camps will also send a link to the [BC Covid-19 Self Assessment Tool](#) to families to complete on behalf of their camper(s) the day before the camp session begins. This process will apply to staff and volunteers prior to arrival at camp.

All persons will be screened daily for the following COVID-19 symptoms:

- Fever or chills
- Cough
- Loss of sense of smell or taste
- Difficulty breathing

Other symptoms may include:

- Sore throat
- Loss of appetite
- Extreme fatigue or tiredness
- Headache
- Body aches
- Nausea or vomiting
- Diarrhea

See [Symptoms \(bccdc.ca\)](#) for more details.

Camp leaders will assist campers in completing their daily screening. Daily screening records will be kept onsite for the duration of the camping season.

Any person with a failed screening will be immediately isolated and the procedures for [What To Do When Symptoms Develop At Camp](#) followed.

- Camp staff must complete a daily employee health check as per the [PHO Order](#). Daily employee health checks must confirm staff do not have any symptoms of COVID-19, have not travelled outside the country in the last 14 days, or been a close contact of a confirmed case of COVID-19. This can take the form of a written check, verbal check, or online check.



- Parents/caregivers should complete a [daily health check](#) for their child for one week prior to the camp. A child who has answered Yes to any question is not allowed to attend camp and must follow public health guidance for testing and self isolating.
- Camps may develop their own daily health check procedure or use the Ministry of Education's [K-12 Health Check](#) app for campers or the [BC Self-Assessment Tool](#) for campers and staff.

7.2. Staying Home and Self-Isolation

The following campers, staff, or other persons are required to stay home and [self-isolate](#):

- Anyone with fever or chills, cough, loss of sense of smell or taste, difficulty breathing, sore throat, loss of appetite, extreme fatigue or tiredness, headache, body aches, nausea or vomiting, and diarrhea.
- Anyone who has travelled outside of Canada in the last 14 days.
- Anyone who lives in a household with someone who has COVID-19.
- Anyone who has been identified by Public Health as a close contact of someone with COVID-19.
 - If a person is found to be a confirmed case of COVID-19, public health staff will ensure there is robust contact tracing and management of any clusters or outbreaks.
 - Public health will also ensure that children, staff, and parents/caregivers have access to healthcare providers and that appropriate supports are in place.

7.3. What To Do When Symptoms Develop At Camp

Isolation plans for ill staff and campers (and accommodating more than one ill person at a time) on site needs to be robust and safe (especially if isolating a younger camper). Anticipate that some ill people may not be able to return home immediately or at all (e.g. staff who come from out of province or region), and may need to isolate for an extended period of time (up to 10 days) on site.

- If a camper or staff member develops a new cough (unrelated to pre-existing conditions such as asthma), fever, chills, shortness of breath, loss of taste or smell, or other symptoms of COVID-19 during the camp session, isolate them away from others immediately, and arrange for a COVID-19 test.
 - Camps should consider Point of Contact (POC) testing for symptomatic individuals. POC testing provides rapid screening of potential cases and is especially useful in remote locations and where access to community testing centres is difficult.
 - Free Provincial Health Services Authority testing information is available [here](#). The application process and delivery involve some work and training to complete.
 - Private testing kits are available for as little as \$6.50 per test. This may be the better option for testing small numbers of symptomatic individuals.
- The person will remain in isolation until test results are returned:
 - If the person tests positive, they will need to be picked up from camp by their caregiver within 24 hours. Provincial health authorities will be notified.
 - If the person tests negative and symptoms resolve, they can return to programming.
 - While waiting for a sick child to be tested or picked up, a staff member should stay with the child in a room isolated from others or at least 2 metres from others if a separate room is not available. The staff person should remain as far away as possible from the child (preferably



- at least 2 metres). A mask should be worn by both the camper (if tolerated) and the staff person.
- A sick staff member should isolate themselves in their accommodation or a private room until a COVID-19 test can be arranged.
- Anyone who is rapidly getting more ill or seeming to be in distress should be seen by medical personnel as soon as possible, with 911 called if necessary.
- If anyone who has entered the camp facility is diagnosed with COVID-19, report to and consult with the local [public health authority](#) for advice.
- Report to the local [public health authority](#) any cluster of illness among the camp staff or campers.

7.4. Finding, Tracing, and Managing Outbreaks

- The role of finding, tracing, and managing outbreaks is the responsibility of Public Health, not camp staff.
- If there is a confirmed case, cluster, or outbreak of COVID-19 in a camp, the local medical health officer will lead the response. This includes working with the camp to determine if any additional measures or changes to the camp's health and safety plan are required. Self-isolation of individuals or a household and additional measures such as cleaning and temporary restriction or modification of certain camp activities may be required. Only in exceptional circumstances would a medical health officer consider a camp closure.
- Clear and concise record keeping by camp staff of all persons entering the camp property and incidents that occur at camp can help public health staff accomplish their job.
- Attendance should be taken each day, including staff, volunteers, and any parents, caregivers, or guests who remain on site for any length of time, to assist in contact tracing should the need arise.

8. Personal Health Practices

8.1. Hand Hygiene

Proper hand washing with plain soap and water reduces the spread of illness. Everyone should practice diligent hand washing when arriving at camp, before and after eating, and before leaving. Throughout the day, hands should be sanitized with soap and water or alcohol-based hand rub.

- Camps must ensure campers have access to at least one sink for hand washing with soap and water.
- Wash hands with soap and water for a minimum of 20 seconds.
- Alcohol-based hand sanitizer containing at least 60% alcohol may be used if sinks are not available.
- If hands are visibly soiled, alcohol-based hand sanitizers may not be effective at eliminating respiratory viruses. Soap and water are preferred when hands are visibly dirty.
- Include regular hand washing times in daily schedules.
- Ensure the camp is well-stocked with hand washing supplies at all times including plain soap, clean towels, paper towels, waste bins, and, where appropriate, hand sanitizer with a minimum of 60% alcohol.



- Children regularly forget about proper hand washing. Staff and campers should practice, and staff should model washing hands properly in a fun and relaxed way.
- Staff should assist young campers with hand hygiene as needed.
- An information sheet on when campers and staff should practice hand hygiene is included in [Appendix A](#).

8.2. Respiratory Etiquette

- Cough and sneeze into your elbow. Throw away used tissues and immediately perform hand hygiene. Teach this to both campers and staff.
- Remind campers and staff to avoid touching their eyes, nose, or mouth with unwashed hands.
- Refrain from sharing any food, drinks, or unwashed utensils.

9. Personal Protective Equipment (PPE)

Masks play an important role in preventing the spread of COVID-19. They provide some protection to the wearer and to those around them. Masks do not prevent the spread of COVID-19 on their own and should not be used in place of physical distancing or any other measures noted in this guidance. Masks can be safely worn by school-aged children. The term ‘mask’ in this document means a non-medical mask or face covering. Medical-grade masks are not recommended within camp settings for general use.

9.1. Non-Medical Masks and Face Coverings (Masks)

- Masks are required to be worn by staff in indoor settings except when:
 - Sitting or standing at their desk or workstation
 - There is a barrier in place
 - Eating or drinking
 - They are in their own housing unit
- Masks are required to be worn by all campers in Grade 4 (9 years old as of December 31, 2021) and older when indoors except when:
 - Eating or drinking
 - They are in their own housing unit
- Campers in Grades K to 3 (under 9 years of age as of December 31, 2021), are encouraged to wear a mask indoors and on buses, but are not required to do so - mask wearing remains a personal or family/caregiver choice for these campers, and their choices must be respected.
- Camps are permitted to enact their own more rigid mask wearing policies if deemed appropriate for their site, program, and circumstances.
- Staff should be trained on proper donning and doffing of PPE such as masks. Refer to [WorksafeBC](#) for details.
- Masks are not needed when urgent actions are required to support child safety.

9.2. Gloves

- Gloves should be worn for COVID-19 disinfecting and cleaning measures and disposed of after use.



- Staff should be trained on proper donning and doffing of PPE such as gloves. Refer to [WorksafeBC](#) for details.

9.3. Face Shields

- Face shields are not required in the camp setting and should not be worn as a replacement for a non-medical mask. A person choosing to wear a face shield should wear a mask in addition to the face shield.
- Staff should be trained on proper donning and doffing of PPE such as face shields. Refer to [WorksafeBC](#) for details.

9.4. Emergency First Aid PPE

- Camps are required to have the following PPE available for staff use in the event of a first aid emergency that could be deemed high risk (i.e. aerosol generating activities such as chest compressions, ventilations, high flow oxygen administration-greater than 5 lpm, suction, abdominal thrusts/back blows).
 - Respiratory Protection: N95 Mask (non-valve) or Surgical Mask (3-layered).
 - Eye Protection: Where possible face shields or personal protective goggles should be used during high risk first aid scenarios.
 - Body Protection: Long-sleeved water resistant gowns should be used to prevent body contamination.
 - Bag Valve Mask with Viral Filter (e.g. HEPA): for use during ventilations. Viral filters must remain in their original packaging.
 - Pocket Mask with a Viral Filter (e.g. HEPA): viral filters must remain in their original packaging.
 - More information can be found at [WorksafeBC](#).

Appendix A: When to Perform Hand Hygiene at Camp

When Campers Should Perform Hand Hygiene	When Staff Should Perform Hand Hygiene
<ul style="list-style-type: none">• When they arrive at camp• Before and after any activities• Before and after eating and drinking (excluding from their water bottle during activities)• Before and after using an indoor space used by multiple cohorts (e.g. arts & crafts room)• After using the toilet• After sneezing or coughing into hands• Whenever hands are visibly dirty	<ul style="list-style-type: none">• When they arrive at camp• Before and after any breaks• Before and after eating and drinking• Before and after handling food or assisting camper with eating• After using the toilet• After contact with body fluids (i.e., runny noses, spit, vomit, blood)• After cleaning tasks• After removing gloves• After handling garbage• Whenever hands are visibly dirty