



## SUMMER CAMP GUIDANCE REGARDING COVID-19

This document contains the Daniel Webster Council guidance regarding the management of COVID-19 at Daniel Webster Council summer camps.

This document is guidance. Camp medical personnel and unit leaders are expected to use good judgement balancing the competing priorities of preserving and protecting the individual scout's summer experience while also protecting the camp community at large.

### Background:

COVID-19 symptoms can be broken into two groups:

<b>Major Symptoms</b>	<b>Minor Symptoms</b>
Fever 100.4° F (38° C) or higher	Sore throat
New or worsening cough	Nausea
Difficulty Breathing	Vomiting
Decrease or loss of taste or smell	Diarrhea
	Chills
	Muscle pain
	Fatigue
	Severe headache
	Nasal congestion or runny nose

Major symptoms are concerning for COVID-19, generally without regard for the clinical situation. Minor symptoms are less concerning, and the number of symptoms as well as the clinical context in which they occur all need to be taken into account when determining the appropriate course of action. Camp medical personnel are the final authority regarding who must be tested and the actions needed to prevent the spread of COVID-19.

### Screening and Testing Guidance:

#### Pre-arrival:

Unit leadership should monitor all unit members, both adult and youth, for symptoms for two weeks prior to arrival at camp.

## **Arrival Screening Plan:**

Camp medical personnel will review the two week screening documentation with the unit prior to permitting entry to the camp.

Individuals who were asymptomatic for the two week screening period and are FULLY VACCINATED (two weeks have passed since their final vaccine administration) will be admitted to camp without additional precautions and NEED NOT be tested for COVID-19.

Individuals who were asymptomatic for the two week screening period and are NOT FULLY VACCINATED will be admitted to camp without additional precautions and WILL be tested for COVID-19 by the camp using a PCR test.

Individuals who have had any major symptoms or two or more minor symptoms during the two week screening period AND their symptoms have RESOLVED 5 OR MORE DAYS prior to arrival at camp will be handled as follows:

If the result of an outside PCR test conducted 5 or more days after resolution of symptoms is available at time of arrival at camp and is negative, the individual will be admitted to camp without additional precautions. No further testing is required.

If no outside PCR test result is available, the individual will be admitted to camp and WILL be tested for COVID-19 by the camp using a PCR test. The individual MUST wear a mask at all times until the PCR result returns negative, except when tenting alone or equivalent, or eating with their unit or alone.

If the outside PCR is positive, the individual will not be admitted to camp.

Individuals who have had any major symptoms or two or more minor symptoms WITHIN 5 DAYS of arrival at camp AND the symptoms have resolved prior to check-in MAY be admitted to camp ONLY if they have a negative rapid antigen test upon arrival at camp. PCR testing will also be obtained upon arrival REGARDLESS of vaccination status. The individual MUST wear a mask at all times until the PCR result returns negative, except when tenting alone or equivalent, or eating with their unit or alone.

Individuals who have any major symptoms or two or more minor symptoms at the time of arrival at camp are not eligible to attend camp.

**Individuals who refuse testing when requested by camp medical staff will not be admitted to camp.**

## **Backup Arrival Screening Plan:**

In the event that PCR testing is unavailable or is below the the capacity required to execute the standard arrival screening plan, this backup plan will be implemented.

Individuals will be screened using the BSA Model COVID-19 Pre-Event Screening Checklist (<https://filestore.scouting.org/filestore/HealthSafety/pdf/680-057.pdf>) attached at the end of this document, as follows:

FULLY VACCINATED individuals (two weeks have passed since their final vaccine administration) will be screened for SYMPTOMS ONLY using only the bottom half of the Pre-Event Screening Checklist beginning at "Symptoms of COVID-19."

NOT FULLY VACCINATED individuals will be screened using the entire checklist as written.

### **In Camp Precautions:**

Adult leadership will screen their units daily for symptoms of COVID and will refer any individual who has symptoms to camp medical staff for testing.

All personnel will wear masks when transitioning between activities or locations, or in any environment where six foot distancing from other units and individuals cannot be absolutely maintained.

Masks need not be worn when the unit is alone in its own campsite or when the unit is alone at an activity site, not including the presence of camp staff.

Unit leaders will keep a log of the members of all cohorts and the activities all cohorts participate in, including dates, times and locations of activities. This log must be retained by the unit for 30 days after the conclusion of camp. This log must be presented to camp medical personnel for use in contact tracing if requested.

### **Testing During Camp Session:**

Any individual who develops a major symptom of COVID-19 WILL be tested using a rapid antigen test REGARDLESS of vaccination status. The individual will be isolated in the health lodge or other location to be determined by camp medical staff until the return of the test result.

This provision does not apply to individuals with shortness of breath and/or cough who also are known to have asthma AND in the opinion of the camp medical staff are exhibiting symptoms only of asthma, are afebrile, have no loss of taste or smell, have no minor symptoms of COVID-19, AND who respond appropriately to treatment for asthma.

Any individual who develops two or more minor symptoms of COVID-19 WILL be tested using a rapid antigen test REGARDLESS of vaccination status. The individual will be isolated in the health lodge or other location to be determined by camp medical staff until the return of the test result.

This provision does not apply to individuals who, in the opinion of camp medical staff, have a clear and convincing alternative explanation for their symptoms AND have NO symptoms that are not adequately explained by the alternative explanation.

Any asymptomatic individual deemed to be a close contact of a COVID-19 positive individual AND who is NOT FULLY VACCINATED will be tested using a rapid antigen test. The individual will be isolated in the health lodge or other location to be determined by camp medical staff until the return of the test results.

Camp medical personnel may require testing and/or isolation of ANY individual that they believe, in their best medical judgement, represents a risk to the health and safety of the camp community based either upon the individual's symptoms or situation, even if none of the above criteria are met. THIS OPTION IS NOT TO BE INVOKED LIGHTLY BY CAMP MEDICAL STAFF, but is provided because no advance guidance can anticipate all possible situations.

**Individuals who refuse testing when requested by camp medical staff will be removed from camp.**

**Post Camp Precautions:**

Individuals are encouraged to take additional precautions around high risk individuals for 14 days after leaving camp.

Units must retain activity logs for 30 days for contact tracing, as previously noted.

**Positive COVID-19 tests:**

Individuals who test positive for COVID-19 must be removed from camp as soon as practicable. They will be isolated in the health lodge or other location to be determined by camp medical staff until they leave camp.

Contact tracing will be initiated on any COVID-19 positive individual as soon as practicable.

**Isolation Procedures:**

Isolation is for the purpose of limiting the spread of COVID-19. Medical staff should prioritize the social and emotional well-being of the individual in isolation to the extent possible. Scouts should be visited by VACCINATED unit leadership. Recreational opportunities should be provided to the extent possible given the need to isolate.

Isolation should be accomplished in an area where six foot distancing can be maintained and which, ideally, has good air exchange with the outdoors. Because of its medical nature, the health lodge is often the best location for isolation. However, if the health lodge cannot accommodate isolation due to other circumstances, such as another disease outbreak filling the lodge, isolation can be conducted in other locations.

The unit campsite may be appropriate if YPT compliant supervision can be provided and there are adequate resources for the individual to tent alone. The campsite could be an especially good choice if the majority of the unit has been determined to be close contacts of a COVID-19 positive individual, such as another member of the unit.

**Conclusion:**

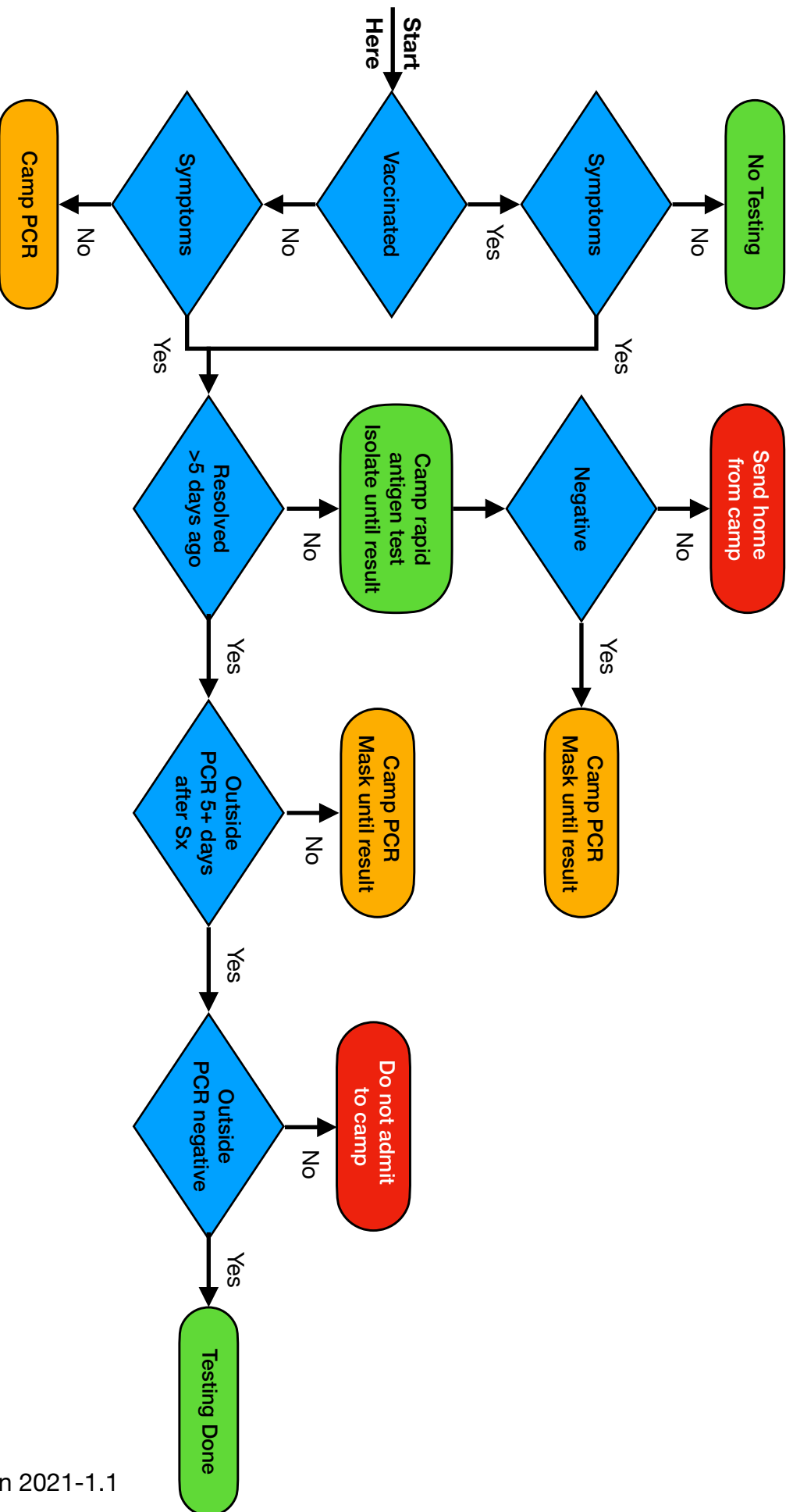
The goal of this guidance is to maximize both the safety of the camp community and the experience of the individuals in that community. Camp medical staff are encouraged to use their judgement to meet both needs — they should be neither cavalier nor overly cautious in the implementation of this guidance.

**Approved June 27th, 2021**



Peter L. Row, MD

# ARRIVAL SCREENING FLOWCHART



Orange boxes require follow up on testing to confirm that the test is negative. Positive tests must be sent home.

# Model COVID-19 Pre-Event Medical Screening Checklist

Use this checklist to assist in identifying potential COVID-19 cases before event participation.

Review with each youth and adult participant their current health status, both before departure and upon arrival at the event. **Anyone entering a camp or event – including visitors, vendors, etc. – must be screened.**

**Councils should customize with input from their council health supervisor and local health department.**

- Yes  No Have you or has anyone in your household been in [close contact\\*](#) in the past 14 days with anyone known or suspected to have COVID-19 or is otherwise sick?
- Yes  No Have you or has anyone in your household been in [close contact\\*](#) with anyone who has been tested for COVID-19 and is waiting for results?
- Yes  No Have you or has anyone in your household been sick in the past 14 days, or have you or they been tested for any illness and are waiting for results?
- Yes  No Has anyone in your household been exposed to an individual known or suspected to have COVID-19 in the past 14 days?
- Yes  No Have you or has anyone you have been in [close contact\\*](#) with traveled on a cruise ship or internationally or to an area with a known communicable disease outbreak in the past 14 days?

**\*According to the Centers for Disease Control and Prevention (CDC), “close contact” means:**

- You were within 6 feet of someone who has COVID-19 for a cumulative total of 15 minutes or more over a 24-hour period
- You had direct physical contact with an infected person (hugged or kissed them)
- You shared eating or drinking utensils
- An infected person sneezed, coughed, or otherwise got respiratory droplets on you

***If the answer is YES to any one of the five questions above, the participant must stay home.***

***If all answers above are NO, proceed to the symptoms list below.***

## Symptoms of COVID-19

*If anyone in your household has **any one** of the following new or worsening signs or symptoms of possible COVID-19, the entire household must stay home.*

- Shortness of breath**
- Cough**
- Fever of 100.0° or greater**
- Flu-like symptoms**
- Repeated shaking with chills**
- Fatigue**
- Muscle or body aches**
- Headache**
- Sore throat**
- Loss of taste or smell**
- Diarrhea**
- Nausea or vomiting**

## ***\*Potential Higher-Risk Individuals\****

- Yes  No Are you in a higher-risk category as defined by the [CDC guidelines](#), including older adults, people with medical conditions, and those with other individual circumstances?

***If the answer is “yes,” we recommend that you stay home.***

***Should you choose to participate, you must have approval from your health care provider.***