

COVID-19 Preparedness Plan for Camp Voyageur (Draft)

Camp Voyageur is committed to providing a safe and healthy workplace for all our staff and customers. To ensure we have as safe and healthy workplace, we have developed the following COVID-19 Preparedness Plan in response to the COVID-19 pandemic. Administrators and workers are all responsible for implementing this plan. Our goal is to mitigate the potential for transmission of COVID-19 in our workplaces and communities, and that requires full cooperation among our staff and customers. Only through this cooperative effort can we establish and maintain the safety and health of all persons in our workplaces.

Our staff is responsible for implementing and complying with all aspects of this COVID-19 Preparedness Plan. Camp Voyageur staff have our full support in enforcing the provisions of this policy and we encourage our staff to ask questions, raise safety and health concerns and offer suggestions related to the plan and its implementation.

Our workers are our most important assets. We are serious about safety and health and keeping our staff working at Camp Voyageur. Worker involvement is essential in developing and implementing a successful COVID-19 Preparedness Plan. We have involved our workers in this process by bring our camp nurse in on a staff Zoom call to provide an overview of our plan, remained open to feedback, and integrated worker suggestions into developing the plan. Our COVID-19 Preparedness Plan follows State of Minnesota Industry Guidance for our business, Centers for Disease Control and Prevention (CDC) Guidelines, federal Occupational Safety and Health Administration (OSHA) standards related to safety and health precautions required in response to COVID-19 and applicable executive orders. The plan addresses the following:

1. policies and procedures that assist in the identification of sick workers and ensure sick workers stay home;
2. implementation of engineering and administrative controls for social distancing;
3. worker hygiene and source controls;
4. workplace building and ventilation protocols;
5. workplace cleaning and disinfecting protocols;
6. drop-off, pick-up and delivery practices and protocols; and
7. communications, training and supervision practices and protocols.
8. what customers and clients can do to minimize transmission;
9. additional protections and protocols for receiving and exchanging payment;
10. additional protections and protocols for managing occupancy;
11. additional protections and protocols to limit face-to-face interactions; and
12. additional protection and protocols for distancing and barriers.

1. Policies and procedures that assist in the identification of sick workers and ensure sick workers stay home

Workers have been informed of and encouraged to self-monitor for signs and symptoms of COVID-19. The following policies and procedures are being implemented to assess workers' health status prior to entering the workplace and for workers to report when they are sick or experiencing symptoms.

Camp Voyageur has adopted its screening and initial response for clients and staff from the Field Guide for Camps and Implementation of CDC Guidance, which was prepared for the American Camp Association and YMCA of the USA by Environmental Health & Engineering, Inc. on May 18, 2020:

SCREENING AND INITIAL RESPONSE FOR STAFF

The following outlines three screening phases that can be used by camp healthcare staff to identify and staff members that might have a respiratory infection or might require additional consideration before admittance to or continued participation in camp. Although not every staff member who has respiratory infection symptoms will have COVID-19, using a screening process may be helpful in identifying those who may need medical care or who may not be cleared to enter camp. This guidance can be added to a camp's existing health screening process. The three phases of screening include pre-screening, initial screening, and ongoing screening. It is important to be aware that state and local regulations may provide additional requirements on these processes.

PRE-SCREENING

Offering pre-screening before staff head to camp will give insight into each individual's health status prior to arrival.

Staff should self-monitor for 14 days and conduct pre-screening activities such as:

- Taking and recording their own temperature for 14 days before camp (refer to the individual instructions provided with the thermometer).
- Self-screening for the presence of symptoms (fever of 100.4 °F or greater, cough, shortness of breath, diarrhea, fatigue, headache, muscle aches, nausea, loss of taste or smell, sore throat, vomiting, etc.) within the past two weeks.
- Determining if, within the past two weeks, the individual has traveled nationally or internationally.
- Determining if the individual has been in close contact with a person who has been diagnosed with, tested for, or quarantined as a result of COVID-19.

If a staff member is flagged during the pre-screening process, the camp would need to follow their communicable disease plan (CDP) or, for day programs without a CDP, applicable childcare standards¹ to make a decision about admittance. The camp should consider sharing their CDP in advance of camp opening with local health departments.

INITIAL HEALTH SCREENING

The initial health screening should be incorporated into the existing screenings suggested by ACA Health Standard HW.6 upon the arrival of staff at camp. The questions asked will be similar to those considered during the pre-screening process. The results of this initial health screening will determine if an individual is permitted to enter camp or if they require additional screening and evaluation.

ONGOING SCREENING

Ongoing screening should be conducted by camps on an as-determined basis (e.g., daily, weekly, or more frequently). Consider increased screening frequency during initial days of camp, when there is turnover of camp sessions/staff, when monitoring for potential exposures, or daily for day camps.

Ongoing Screening Procedure

1. Ask the individual if they have any COVID-19 symptoms: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>.
2. Next, check the temperature of the individual according to camp processes using an appropriate thermometer of choice. Refer to the original instructions provided with the thermometer. Clean the thermometer with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each staff member.
3. If staff is suspected to have COVID-19 based on this assessment, place a face mask or cloth face covering on the individual. Isolate individual by separating symptomatic individuals by at least 6 feet. The area for individuals with symptoms should be at least 6 feet away from other areas of the health center or in a separate room. Health staff should wear an N95 respirator (for aerosol generating procedures) or face mask, a face shield or other eye protection, disposable gloves, and a disposable gown (if conducting aerosol generating procedures) while working with individuals who have a suspected case of COVID-19.
4. Notify camp management, parents/guardians, and appropriate healthcare providers in accordance with guidance from your local health officials, following the camp's CDP.
5. Follow the CDP for next steps on management of the individual. For example, refer to the Response Planning and Response Initiation sections of the ACN CDP for case management of suspect or probable case(s).

NOTE: At this time, COVID-19 specific testing is not part of the screening process.

Response and Management of Case(s) or Probable Case(s)

If a staff member is identified as having a potential or confirmed case of COVID-19, isolate the individual in a location previously identified as part of the camp's communicable disease plan (CDP). Follow protocols outlined in the CDP and consider the following:

- Consider if a staff member warrants further clinical evaluation, and if so, make arrangements to do so, either in-person or via telehealth.
- If staff member does not require immediate clinical evaluation, and if CDP calls for the individual to return home, isolate the individual until appropriate return to home transportation can be arranged.
- If staff member does not require immediate clinical evaluation, and if CDP calls for isolation of individual within the camp facility (e.g., overnight camps):
 - Follow CDC Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for Coronavirus Disease 2019 (COVID-19),
 - Make arrangements with camp administration and counselors to have the person's belongings moved,
 - Clean the person's sleeping areas according to CDP and procedures outlined in Chapter 6 Cleaning and Disinfection of the Field Guide.
 - Consider testing options and notification of State and local officials.

It is crucial to carry out "contact tracing" immediately to determine the potential or confirmed case's contacts with other staff members over the previous two or more days.

Assessing and informing those with potential exposure is a fundamental control strategy for minimizing spread within a group or camp population. CDC defines close contact as interactions within 6 feet for more than 15 minutes. Contact tracing should be carried out by trained staff (e.g., public health staff, community health workers, trained volunteers) in conjunction with the local health department. However, camp health staff can

utilize general principles of contact tracing to begin closely monitoring other potentially exposed individuals. Staff within the “household” of the index case should have enhanced surveillance for symptoms and camps should consider mitigation measures including minimizing this group’s exposures to other “households” or groups. This could include separate programming (shadow camp), dining, and wash times.

Key CDC suggestions for contact tracing include:

- Always follow established core principles of contact tracing.
- Conduct contact tracing with only trained staff or trained volunteers. Training should be conducted prior to the start of camp.
- Identify contacts quickly and ensure they do not interact with other staff members.
- Communicate with local and state health officials and all camp stakeholders.
- Best Practice: Implement data management and technology tools to assist in case investigations, contact tracing, and contact follow-up and monitoring.
- Monitor key components of contact tracing programs and improve performance as needed.

Camp Voyageur has implemented leave policies that promote workers staying at home when they are sick, when household members are sick, or when they are required to isolate or quarantine themselves or a member of their household. Accommodations for workers with underlying medical conditions or who have household members with underlying health conditions have been implemented. They must follow our guidelines established in our plan.

Camp Voyageur has also implemented a policy for informing workers if they have been exposed to a person with COVID-19 at their workplace and requiring them to quarantine for the required amount of time. In addition, a policy has been implemented to protect the privacy of workers’ health status and health information.

2. Social distancing – maintaining six feet of physical distancing

In general, 6 feet of separation is the distance that should be kept between people interacting within our community. This recommendation is most important in the setting of a large gathering where there is intermingling of people whose symptom status may be hard to monitor.

Small, closed pods that serve a consistent group of staff offer the opportunity to more closely control the environment through monitoring of symptoms and adherence to policies for people who are ill. Additionally, staff will build routines to wash hands upon entering and leaving building spaces, and create regular cleaning practices for frequently used items. Social distancing guidance will support a 3-foot radius around each staff and customer, resulting in a 6-foot total distance between any two people.

Social distancing of six feet will be implemented and maintained between workers in the workplace and between workers and customers or clients in the through the following engineering and administrative protocols, adopted from the Guidance for Social Distancing in Youth and Student Programs by the Minnesota Department of Health, updated on 5/13/2020:

Our plan and preparation:

- CDC and MDH recommends that all businesses identify program coordinators who are responsible for COVID-19 issues and preventive activities. Our coordinators are John Erdmann, Deb Erdmann, and Alex Kvanli.
- Our communications with staff and customers includes what strategies will be implemented to mitigate the risk of COVID-19 exposure in the camp community, and acknowledge that strategies may change if the level of community transmission increases to the point where programming must be disrupted.

Promoting a safe program environment.

- Adapt practices to allow physical distancing of at least 6 feet whenever possible.
 - Try to adhere to a staff (or volunteer) to participant ratio of 1:9. If social distancing cannot be attained with the group size, then the number of participants must be reduced.
 - Within the camp community, create consistent pods of the same staff, volunteers, and customers with a maximum number of 10 people in each pod.
 - Whenever possible, implement programming that refrains from intermixing pods. If intermixing of pods is necessary, limit the number of pods that intermix and keep records of staff, volunteers, and customers that intermix.
 - Have a plan for back-up staffing in case a staff member or volunteer becomes ill during the day/program.
 - Wherever possible, hold activities outdoors and encourage participants to spread out.
 - If social distancing cannot be adhered to for some activities, cancel the activity.
 - Avoid having areas easily accessible that would allow staff, volunteers, or participants to easily congregate in a limited space.
 - Reduce the number of people on transportation vehicles to allow them to spread out. Consider using visual cues to illustrate where participants may sit to adhere to social distancing.
 - If helping participants apply sunscreen, ensure staff and volunteers are washing hands between applications.
- Practicing social distancing in an indoor environment.

Maintain safe program spaces.

- Modify areas where participants are likely to be in very close contact.
- Whenever possible, hold meetings outside and encourage participants to spread out. Consider using visual cues to demonstrate physical spacing.
- Rearrange common seating spaces to maximize the space between participants.
- Use visual aids (e.g., painter's tape, stickers) to illustrate traffic flow and appropriate spacing to support social distancing.
- Avoid community supplies when possible.
- If shared supplies are necessary, consider using designated bins for clean and used supplies. Community supplies are considered high-touch and should be cleaned frequently. ▪ Do not share equipment between staff, volunteers, and participants when possible.
 - For example, consider designating paddles or tennis rackets to participants or asking families to send them with participants whenever feasible.
 - Clean high touch surfaces between different groups.
- Consider ways to accommodate the needs of children and families at risk for serious illness from COVID-19.
- The CDC lists underlying medical conditions that may increase the risk of serious COVID-19 for people of any age: Groups at Higher Risk for Severe Illness (www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/groups-at-higher-risk.html).

Promote cloth face coverings

- Follow cloth face covering guidance for schools and child care.
 - Staff members working in youth and participant programs are encouraged to wear cloth face coverings during the work day as much as possible.
 - MDH recommends participants/children only wear cloth face coverings if they can reliably wear, remove, and handle the cloth face covering throughout the day.

Strategize meal times

- Wherever feasible, use Grab & Go style meals

- Stagger meal times to minimize the number of people dining inside at one time and keep people 6 feet apart.
 - Don't intermix pods, and maintain a consistent group of pods that are dining at the same time each day whenever possible.
 - These steps will help minimize transmission and also allow for swift contact tracing if needed.
- Clean and disinfect common surfaces between groups.
- If meals are typically served family-style, plate each meal to serve it so that multiple people are not using the same serving utensils (e.g., have staff serve food to participants).
- Serve meals outside or in alternative indoor areas as weather allows.
- Staff serving meals should follow MDH's Food Service Worker Safety Information (www.health.state.mn.us/diseases/coronavirus/schools/foodservice.pdf).

Minimize opportunities for mixing between groups

- Stagger arrival and/or dismissal times.
- Minimize crowding at drop-off and pick-up times.
 - Designate times for families to come, consider staggering times if possible.
 - Whenever possible, participant pick-up and drop-off should occur outside.
 - Add visual cues or barriers to direct traffic flow and distancing.
 - Develop signage and processes to minimize interactions of families.
- Consider dividing participant entry points rather than funneling all participants through the same entry space. These approaches can limit the amount of close contact between participants in high-traffic situations and times.
- MDH recognizes that busing times are often tightly scheduled. Consider making arrival schedule changes for participants who walk or are dropped off by a parent or caregiver.
- Cancel field trips, assemblies, and other large gatherings.
- Cancel activities and events like field trips, participant assemblies, athletic events, practices, special performances, program-wide meetings, or spirit nights.
- Consider transitioning field trips to free virtual opportunities.
- Consider changing events to a virtual format where appropriate.
- Stagger sauna use rather than allowing multiple pods to sauna together. Limit other activities where multiple pods interact.
- Wash hands before and after touching play structures and maintain 6 feet of space from other children as much as possible. When possible, build in visual cues that demonstrate physical spacing.
- If possible, consider cleaning high touch areas of the play structure between groups.
- Avoid contact with shared public amenities like picnic tables, benches, and playground equipment.
 - Assume such equipment has not been cleaned.
 - Have staff, volunteers, and participants wash hands or use hand sanitizer if they come into contact or use shared amenities.
- Designate restrooms for each pod.
- Limit the presence of volunteers.
- Do not allow the public access to facilities when in use.
 - Limit access to the program's indoor facilities to staff, volunteers, and participants of the program.
- Promote staff, volunteers, participants, and their families to maintain distance from each other.
- Educate staff, volunteers, participants, and their families and explain why this is important.
- Provide reminders about the importance of not sharing food or drinks.
- If possible, consider cleaning high touch areas of the play structure between groups.
- Exercise caution when using drinking fountains.

- Think carefully about how faucets are being used for filling water bottles and how regularly they are being cleaned in making a decision to use them.
- If you do use them, ensure there are hand hygiene products available right next to the drinking fountain and encourage users to perform hand hygiene before and after using one.
- Adhere to current travel restrictions
 - CDC's Travel Updates for COVID-19 (www.cdc.gov/coronavirus/2019ncov/travelers/index.html)

Encourage and reinforce social norms and health etiquette.

- Promote materials and trainings to ensure that staff, volunteers, and participants:
 - Wash hands often with soap and water for at least 20 seconds, especially after having been in a public place or after blowing your nose, coughing, or sneezing. If soap and water are not available, use a hand sanitizer that contains at least 60% alcohol.
 - Hand Hygiene (www.health.state.mn.us/people/handhygiene/index.html)
 - Always cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in the trash. If you don't have a tissue, cough or sneeze into your arm or elbow.
 - Cover Your Cough (www.health.state.mn.us/people/cyc/index.html)
- Ask staff, volunteers, and participants to wash hands upon arriving, before and after eating meals, before and after applying sunscreen, and when entering or leaving indoor spaces.
 - Consider ways to reinforce good hand hygiene. For example, provide incentives (e.g., creative summer program or camp accolades) for proper and thorough handwashing.
- Have hand sanitizer and tissues readily available for use by staff, volunteers, and participants. • Ensure the availability of appropriate cleaning supplies (e.g., disinfectant wipes) for cleaning of high-touch surfaces (see more details below).
- Educate staff, volunteers, and participants on the importance of avoiding touching their faces throughout the day, and washing their hands when they do.
- Ensure participants aren't sharing water bottles, food, or other items.
- Avoid using other employees' phones, desks, offices, or other work tools or equipment.
- Consider engaging program participants in developing communications or creative strategies to limit the spread of COVID-19 (e.g., develop a competition around creating the new camp greeting, providing alternatives to hugs or high-fives).
- Post posters, use social media, email communication, etc. around symptoms of COVID-19 and health etiquette expectations.

Promote health checks.

- Promote social distancing and reduce congestion in the health office.
- Use the health services office for participants, staff, and volunteers with COVID-19 like symptoms and, if possible, create a satellite location for first aid or medication distribution.
- Allow for flexible administration of health care tasks for participants who are able to independently manage needs.
- Consider using visual cues to demonstrate physical spacing. ☑ Emphasize the importance of daily health checks.
 - This includes screening for participants, staff, and volunteers to ensure those who develop symptoms are not attending.
 - Screening process for children: Guidance for Child Care Programs that Remain Open (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#ScreenChildren)
 - Consider using a similar system to the employee screening checklist: Visitor and Employee Health Screening Checklist (PDF) (www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf)
 - If it is not feasible to conduct health screening given the setting:
 - Provide parent education about the importance of monitoring symptoms and staying

home while ill through classroom applications and other district messaging.

- Ask about access to thermometers and consider implementing temperature checks for households that do not have one.
- Use existing outreach systems to provide text and email reminders to staff and families to check for symptoms of household members in the morning and evening.
- Use exclusion guidance and isolate symptomatic staff and program participants.
 - Follow exclusions guidance and ensure staff and participants stay home when sick: COVID-19 Exclusion Guidance (PDF) (www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf)
 - Ensure sick policies are supportive of participants and staff staying home when sick.
 - Have a plan if staff or participants get sick.
 - Make a plan with parents prior to sessions around expectations if their child becomes ill while at the program.
 - Plan to have a room or area that can be used to isolate a symptomatic staff member, volunteer, or participants while they wait to be picked up or are able to leave on their own; ensure there is enough space for multiple people placed at least 6 feet apart (in the case more than one participant becomes ill).
 - Ensure that they have hygiene supplies available, including a cloth mask, facial tissues, and alcohol-based hand rub.
 - If you end up having a participant or staff who is diagnosed with COVID-19 reach out to MDH or your local public health agency for further direction.

Be mindful of traveling.

- Limit participation in summer programming to participants and staff who are arriving from Minnesota or bordering states.
- Ask staff and participants to limit their interaction with local communities when off-site to obtaining only essential services; and only allow sparingly or find other ways to get supplies/services. Follow appropriate social distancing and health etiquette measures when interacting with the community.
- Encourage staff to limit their interactions with others on their time off. Promote a safe workplace for staff and volunteers
- Hold staff and volunteer meetings virtually or in a large enough space to accommodate social distancing.
- Encourage non-essential planning and preparatory activities be conducted outside program facilities.
- Consider allowing staff and volunteers to use alternate spaces (e.g., telecommute) for discretionary preparation time.
- Conduct professional development virtually whenever possible.
- Ensure policies are supportive of participants, staff, and volunteers staying home when sick and offer options for people who are at high risk of developing serious symptoms associated with COVID-19.
- Explore opportunities for staff and volunteers who cannot be on-site due to their own high-risk conditions or those of their family members to complete work using alternate spaces (e.g., telecommute).
- Ensure classroom access to hand hygiene products (e.g., hand sanitizer, soap, tissues, disinfectant wipes).
- Ensure the availability of appropriate cleaning supplies (e.g., disinfectant wipes) for cleaning of high-touch surfaces.
- Have hand sanitizer and tissues readily available for use by participants, staff, and volunteers throughout the building.
- Arrange rooms to allow staff and volunteers to practice social distancing.
- Ensure daily cleaning of the program environment.
 - Routine cleaning and disinfecting is key to maintaining a safe environment for staff, volunteers, and participants. Cleaning removes dirt and most germs and is usually done with soap and water. Disinfecting kills most germs, depending on the type of chemical, and only when the chemical product is used as directed on the label.

- Adapt practices to ensure high-touch surfaces such as doorknobs, stair rails, counters, dining hall tables and benches, program equipment, and other items are regularly cleaned and disinfected.
- Follow MDH guidance for cleaning and disinfecting:
 - COVID-19 Cleaning and Disinfecting Guidance for Schools and Child Care Programs (www.health.state.mn.us/diseases/coronavirus/schools/clean.html)
- Clean and disinfect bathrooms regularly, particularly high-touch surfaces, and ensure they have handwashing supplies.
- Use EPA-registered household disinfectants recommended by the CDC – Information on Disinfectants: (www.epa.gov/coronavirus).
- Dedicate individual classroom and office materials.
- Do not share writing utensils, classroom, and office supplies between participants, staff, or volunteers (when possible).
- Frequently clean office materials or equipment that cannot be designated.
- Place hand hygiene supplies in close proximity to shared equipment (e.g., printer/copier).

3. Worker hygiene and source controls

Worker hygiene and source controls are being implemented at our workplaces at all times.

Camp Voyageur has adopted its worker hygiene and source controls protocols from the Field Guide for Camps and Implementation of CDC Guidance, which was prepared for the American Camp Association and YMCA of the USA by Environmental Health & Engineering, Inc. on May 18, 2020:

Preventing Spread

COMMUNICATION FROM ADMINISTRATION

- Post print material from the CDC (consider posters tailored to children and teens) in or near bathrooms to remind individuals when and how to wash hands.
- Screen, distribute, and incorporate this CDC video resource on proper handwashing into training programs.
- Post print material from the CDC in critical areas where physical distancing should be encouraged: dining areas, common areas, cabins, etc.

HAND HYGIENE

When to Wash or Disinfect Hands – Clients and General Staff

- Before eating food (e.g., when entering the dining area)
- Upon entering your cabin
- After being in contact with someone who may have been sick
- After touching frequently touched surface (railings, doorknobs, counters, etc.)
- After using the restroom
- After using common items, such as sports equipment, computer keyboards and mice, craft supplies, etc.
- After coughing, sneezing, or blowing your nose

When to Wash Hands – Kitchen and Dining Staff

Existing best practices for food preparation apply. Coronavirus is not foodborne, but food service workers who are infected can transmit the virus to coworkers or diners. Refer to the Food Service section for more information. Handwashing is equally important whether gloves are used or not and all recommendations apply regardless of glove use.

- Before and after using gloves
- Before, during, and after preparing any food.
- After handling raw meat, poultry, seafood, and eggs
- After touching garbage.

- After using the restroom
- After wiping counters or cleaning other surfaces with chemicals
- After coughing, sneezing, or blowing your nose
- Before and after breaks

How to Wash Hands

- 1.Wet your hands with clean, running water. Turn off the tap and apply soap.
- 2.Lather your hands by running them together with the soap. Make sure to lather the back of your hands, between your fingers, and under your nails.
- 3.Scrub your hands for at least 20 seconds (about the time it takes to sing the “Happy Birthday” song twice.)
- 4.Rinse your hands well under clean, running water.
- 5.Dry your hands using a clean towel or an air dryer. You may use paper towels to turn off the faucet and/or open doors of the bathrooms.

How to Use Alcohol-Based Hand Sanitizer

Hand sanitizers should contain greater than 60% ethanol or greater than 70% isopropanol. Hand sanitizers are not a substitute for handwashing for kitchen and dining staff.

- 1.Apply the product to the palm of one hand.
- 2.Rub your hands together. Make sure the product contacts the back of your hands, palms, between your fingers, and fingertips.
- 3.Continue to rub your hands together until your hands are dry (about 20 seconds).

Cabins provide living and sleeping spaces for clients and staff. Since sleeping density tends to be high in some camp settings (i.e., bunk beds), it is important to implement controls associated with sleeping arrangements that may help reduce the risk of transmission of COVID-19.

HOUSING

Policy

- Keep the same staff members assigned to a cabin throughout the program; do not rotate staff between cabins.
- Maintain the roster of cabin-members throughout the program; do not rotate clients between cabins. See the “Using Cohorts at Camp” section for guidance on organizing clients and staff members.
- Limit cabin access to only individuals who reside in that cabin; avoid having visitors and parents entering the cabin at drop off and pickup periods in the residential spaces.
- All cabin residents should use hand sanitizer containing at least 60% alcohol or wash their hands with soap and water, for at least 20 seconds, upon entry to their cabin.
- Avoid sharing common items (cups, bedding, etc.) as well as the sharing of individuals’ items with cabin mates.
- Cabins should be cleaned routinely. Refer to the “Cleaning” section of this guide.
- Personal belongings should be limited to essential items plus a limited number of non-essential items.
- Clients should keep personal belongings organized and separate from other clients’ belongings.
- Best practice: clients should be provided a personal storage space (i.e., cubby, footlocker, etc.) for their personal belongings.

Configuration

- Station dispensers of alcohol-based hand sanitizer containing at least 60% alcohol at the entrance or have clients wash their hands with soap and water immediately upon entry.
- Post relevant posters and signage from the Centers for Disease Control and Prevention (CDC), World Health Organization (WHO), and/or other health agencies in cabins in trafficked areas to encourage behaviors which mitigate the spread of disease:
 - COVID-19 information
 - Handwashing

- Cough etiquette
- Symptoms associated with COVID-19
- Stop the spread of germs
- Physical distancing

BATHROOM

- Avoid sharing common bathroom supplies (towels, soap, toothpaste, etc.). Instruct clients to bring their own bathroom supplies and a container for toiletries to be stored in for the duration of camp (for example, a bathroom tote or a 1-quart clear plastic bag labeled with their name).
- Clients should keep personal items in their bag or tote and store their bag or tote in a designated area.
- Keep soap, toilet paper, and paper towels in the bathroom stocked at all times.
- Create a staggered bathing schedule and limit the number of people using the facilities at one time.
- Place a trash can (with a foot-actuated lid or no lid) near the exit of the restrooms to make it easier to discard items.
- Post the Handwashing sign from the CDC in the bathroom to remind clients and staff when and how to properly wash hands.

SLEEPING

- If possible, create at least six feet of space between beds. If utilizing head-to-toe orientation (see below) four feet of space between beds is acceptable.
- If possible, minimize the number of people sleeping in a space by converting common spaces to sleeping areas.
- Position sleepers head-to-toe or toe-to-toe to maximize distance between heads/faces:
 - For bunk beds, position the head of the client in the top bunk opposite the position of the client in the bottom bunk.
 - For side-by-side beds, position the head of the client in one bed opposite the position of the client in the adjacent bunk.
 - For end-to-end beds, position the toes of each client close to the other client's toes.
- Best practice: Create physical barriers between sleepers, especially if a distance of six feet cannot be created, using curtains, sheets, barriers, etc.
- Use bedding (e.g., sheets, pillows, blankets, sleeping bags) that can be washed and dried in a mechanical air dryer. Keep each client's bedding separate.
- Place a label with each client's name on their bed.
- Bedding that touches a child's skin should be cleaned weekly or before use by another child. See the "Laundry" instructions within the "Cleaning for Camps" section.
- Best practice: Store extra bedding in individually-labeled bins, cubbies, or bags.

VENTILATION

- Increase ventilation:
 - Naturally by keeping windows open if weather permits, or
 - Mechanically, by running heating, ventilating, and air-conditioning (HVAC) systems, cabin and bathroom exhaust fans, and pedestal fans, etc.
 - During occupied periods for sleeping areas with mechanical ventilation, optimize outdoor air ventilation by operating HVAC systems at increased outdoor air rates (i.e., increase the percentage of outdoor air). The percentage of outdoor air delivered will be limited to cooling capacity of the HVAC system and its ability to provide an appropriate discharge air temperature while also controlling for humidity. Consider the use of portable HEPA air cleaners in the Health Center or residential bunks with persons in isolation.

4. Workplace building and ventilation protocols

Reopening the workplace includes necessary sanitation, assessment and maintenance of building systems including water, plumbing and electrical systems. Camp Voyageur does not have an HVAC system.

Camp Voyageur has adopted its workplace building and ventilation protocols from the Field Guide for Camps and Implementation of CDC Guidance, which was prepared for the American Camp Association and YMCA of the USA by Environmental Health & Engineering, Inc. on May 18, 2020:

FACILITIES MANAGEMENT OF VENTILATION AND PLUMBING SYSTEMS

The guidance presented here goes beyond simple preparations of a cabin or recreational hall for occupancy and is based upon guidance issued by the American Society of Heating, Ventilating, and Air Conditioning Engineers (ASHRAE) and the U.S. Centers for Disease Control and Prevention (CDC). It includes information on operating building systems and steps that can be taken to check and confirm effective operation of camp facilities.

The recommendations provided below are based on ASHRAE's "Post-Epidemic Conditions" advisory guidance and the CDC guidance for reopening buildings after prolonged shutdown or reduced operation. Although much of the camp experience is based on housing that utilize basic ventilation and plumbing schemes, the manner in which the buildings are opened, prepared, and accepted for occupancy is critical in providing a safe experience for the clients, counselors, and other staff. Because many of the facilities rely on natural ventilation to meet the needs of its occupants, the need for ensuring maximum effectiveness is more challenging than ever. This is especially true in light of the need to minimize the possibility for airborne infection to occur and spread in the camp environment. Maintenance of a safe camp environment will require adherence to basic principles of air movement and ventilation, a commitment to maintenance, and sometimes, creativity. Also, as camps continue to expand their offerings, there are other facilities at camps that may utilize more advanced mechanical systems to provide both localized (room level) and building-wide ventilation and thermal comfort and they are addressed here as well.

The following guidance is broken into a timeline that addresses when each activity should be undertaken in order to have a successful camp opening and camp season. This is a guide we are using, not a rigid playbook.

GENERAL RECOMMENDATIONS

- Assemble a Building Readiness Team that includes key individuals and companies who play a role in the setup and operation of all the camp building systems. The types of service providers that may be required include, but are not limited to, the following:
 - Camp Owner and/or Operator to specify the goals and objectives to be supported by the physical environment and to provide guidance as to how the buildings are typically operated.
 - Maintenance Manager and Support Staff to review current system condition and operation and to ensure it is ready for opening.
 - Mechanical Contractor may be used to supplement the in-house staff to implement repairs to the building mechanical systems that may be identified through the implementation of this guidance.
 - Building Controls Contractor to provide specialized support with modification or repair to the mechanical systems controls.

One Month Before Opening

- Perform an inventory of mechanical systems in all camp buildings (supply fans, exhaust fans, ceiling fans, etc.) and verify their operational status.

- Ensure windows and doors are operational and insect screens and animal guards are in place. •Perform an inventory of heating, ventilating, and cooling (HVAC) systems and document the types and MERV (minimum efficiency reporting value) rating of particulate air filters installed in the systems. This inventory in combination with HVAC performance data can be used for assessing the potential of upgrading the systems to higher efficiency filtration systems, if desired.
- Verify sensor calibration for demand-based ventilation instrumentation, airflow measurement instrumentation, and temperature control instrumentation.
- If the on-site facility manager does not have the appropriate skill set, engage a mechanical service company to inspect and assess the operational capabilities of all mechanical systems including supply and exhaust fans, refrigeration equipment, water heaters, boilers, pumps etc. Two Weeks Before Opening
- Check controls and operation of hot water boilers, steam generators, and heat exchangers to ensure that set points are consistent with those required during normal operation. Confer with the local authorities about requirements for start-up of domestic water systems.
- Check the fuel source for boilers and hot water generators to make sure it is on and available. Confirm that the flues and make-up air paths are open prior to engaging these devices.

One Week Before Opening

- Check domestic hot water heaters for proper operation and setpoint. Confirm that the water heater is set to at least 120°F. For domestic hot water systems equipped with mixing valves, higher primary water temperatures (>130°F) can further reduce the risk of Legionella growth; however, mixing valves must be tested to prevent scalding temperatures.
- Check all drain pans in air handling units and floor drains. Fill with water to ensure that drain traps are wet and do not allow for the passage of sewer gas.

Day Before Opening

- In buildings with operable windows, if the outside air temperature and humidity are moderate, (temperature range between 65°F and 78°F and relative humidity between 20% and 75%), open all windows for four hours minimum. Utilize internal fans, i.e., ceiling-mounted fans or strategically (and safely to avoid tripping hazards) place floor fans to promote air circulation. Operate all exhaust fans during this preoccupancy period as well.
- Consider installing portable high efficiency particulate air (HEPA) filter air cleaners in administrative offices, the health center, and indoor spaces that are provided with mechanical ventilation. These air cleaners should be operated continuously (24/7 operation).
- Implement a flushing plan to flush hot and cold water systems through all points of use (e.g., showers, sink faucets). The purpose of building flushing is to replace all water inside building piping with fresh water.

Day of Opening

- In buildings with operable windows, if the outside air temperature and humidity are moderate, (temperature range between 65°F and 78°F and relative humidity between 20% and 75%), open all windows for three hours minimum before the reoccupation.
- Utilize internal fans, i.e., ceiling mounted fans or strategically (and safely to avoid tripping hazards) place supplementary floor fans to promote air circulation. Operate all exhaust fans during this reoccupancy period as well.

During Ongoing Camp Operations

- Keep internal fans, and operable windows functioning and operational to maintain good air circulation within the camp buildings throughout the season.
- Try to maximize general ventilation by utilizing window and door openings. If windows must remain shut due to weather, insects, or safety conditions, maintain continuous operation of exhaust fans. Consider use of

supplementary floor fans, if overall ventilation and thermal comfort must be improved, especially if there is limited window and door opening opportunities.

5. Workplace cleaning and disinfection protocols

Regular housekeeping practices are being implemented, including routine sanitizing of the workplace and frequent sanitizing of high-touch areas. Workers have been instructed that personal equipment and tools should not be shared and, if shared, should be disinfected between users. Camp Voyageur's protocols for workplace cleaning and disinfectant are from the Field Guide for Camps and Implementation of CDC Guidance, which was prepared for the American Camp Association and YMCA of the USA by Environmental Health & Engineering, Inc. on May 18, 2020:

Encourage and reinforce social norms and health etiquette

- Promote materials and trainings to ensure that staff, volunteers, and participants:
 - Wash hands often with soap and water for at least 20 seconds, especially after having been in a public place or after blowing your nose, coughing, or sneezing. If soap and water are not available, use a hand sanitizer that contains at least 60% alcohol.
 - Hand Hygiene (www.health.state.mn.us/people/handhygiene/index.html)
 - Always cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in the trash. If you don't have a tissue, cough or sneeze into your arm or elbow.
 - Cover Your Cough (www.health.state.mn.us/people/cyc/index.html)
- Ask staff, volunteers, and participants to wash hands upon arriving, before and after eating meals, before and after applying sunscreen, and when entering or leaving indoor spaces.
 - Consider ways to reinforce good hand hygiene. For example, provide incentives (e.g., creative summer program or camp accolades) for proper and thorough handwashing.
- Have hand sanitizer and tissues readily available for use by staff, volunteers, and participants. •Ensure the availability of appropriate cleaning supplies (e.g., disinfectant wipes) for cleaning of high-touch surfaces (see more details below).
- Educate staff, volunteers, and participants on the importance of avoiding touching their faces throughout the day, and washing their hands when they do.
- Ensure participants aren't sharing water bottles, food, or other items.
- Avoid using other employees' phones, desks, offices, or other work tools or equipment.
- Consider engaging program participants in developing communications or creative strategies to limit the spread of COVID-19 (e.g., develop a competition around creating the new camp greeting, providing alternatives to hugs or high-fives).
- Post posters, use social media, email communication, etc. around symptoms of COVID-19 and health etiquette expectations.

ADMINISTRATION

Policy

- Instruct employees to report any COVID-19 symptoms¹ to their supervisors.
- If employees report respiratory illness symptoms, instruct them to stay home.
- If an employee reports symptoms during work, send them home immediately. Clean and disinfect their workstation (which may include the entire kitchen), and consider employees within their vicinity potentially exposed. Implement next steps from the camp's communicable disease plan (CDP).
- If an employee is confirmed to have COVID-19, inform employees of their potential exposure, while maintaining confidentiality. Implement next steps from the camp's CDP.
- Actively encourage sick employees to stay home.

Planning and Preparation

- Maintain an inventory of qualified and licensed staff to fill critical food service positions.
- Stock disposable gloves, facemasks, and cleaning supplies. Enact a plan for the distribution and resupply of these items.
- Provide staff with access to soap and clean running water, disposable gloves, and facemasks. If soap and water are not available to wash hands, use an alcohol-based hand sanitizer.
- Train staff on proper hand washing and control procedures implemented by the camp.
- Provide custodial staff with U.S. Environmental Protection Agency (EPA) approved disinfectants.

Operations and Configuration

- Screen food service employees and assess their symptoms prior to starting work each day.
- Expand the dining space or increase the number of dining spaces to allow diners to maintain physical distance. Encourage physical distance and increased spacing.
- If possible, offer multiple meal times in an expanded window in order to decrease the number of diners in the dining area at a time. Clean and disinfect the dining area between meal times.
- Prioritize, encourage, and make available outdoor seating areas.
- In general, aim to decrease the occupancy density by as much as half. For example, if a table typically seats eight, use only four seats at that table. Set a reasonable occupancy limit.
- Assign seats to diners for two weeks at a time so they occupy the same seat at each meal. Best practice: Assign seats to diners for the duration of camp.
- Best Practice: Avoid buffet style, salad bars, self-service, table, counter food service, and other configurations that require diners to use shared utensils. Prioritize use of “grab-n-go” services (i.e., boxed meals), in which meals are packaged or assembled on a tray for diners to retrieve.
- During family service, encourage counselor and or staff (with clean/sanitized hands) to serve everyone from the table’s serving dishes.
- Offer the option to dine in or outside the dining area by allowing clients to eat in other spaces.
- Encourage diners to maintain physical distancing between themselves and others while in line for their meals. Best practice: Place decals on floors six feet apart to denote where to stand while in line.
- Make stations available for diners to wash their hands with soap and water prior to eating. Station dispensers of alcohol-based hand sanitizer containing at least 60% alcohol at the entrance of the dining facility.
- Leave garbage can lids open in both the kitchen and dining area unless they are equipped with foot-actuated lids. Note that some states may require closed refuse containers in the kitchen.
- Best practice: An individual’s personal water bottle should not be refilled in the kitchen area. Diners should use camp-supplied glasses/cups for beverages and receive a new glass/cup for water if a refill is desired.
- Best practice: Post signs reminding diners of the guidelines such as washing hands, maintaining social distance, using assigned seats, etc. Provide these resources in additional languages and in illustrations as needed.
- Best practice: Remove decorative objects, flyers, and materials from tables and counters to allow for effective cleaning and sanitation.
- Best practice: Discontinue use of condiment dispensers. Offer condiment packets or small containers alongside the prepared meal.
- Best practice: Discontinue the use of beverage dispensers (e.g., fountain drink dispensers, common milk pitcher, etc.). Arrange bottles of beverage choices along a table or counter for diners to retrieve.

FOOD SERVICE WORKERS

Prior to Work (all suggested best practices)

- Shower or bathe before work.
- Trim and file fingernails. Remove nail polish or false nails.
- Wear clean clothes or clean work uniform.

- Wear appropriate and clean footwear.
- Do not work if you are sick or showing flu-like symptoms.
- Wear disposable gloves and avoid direct barehand contact with food.
- Do not wear watches, bracelets, or rings.
- Wear a facemask or cloth face covering.
- Best practice: Wear disposable gowns and/or an apron.
- Maintain a physical distance and increased spacing from other food preparation workers whenever possible.
- Wash hands with soap and water for at least 20 seconds before and after work and breaks; after using the bathroom, blowing your nose, coughing, sneezing, or touching frequently touched surfaces; and before preparing food.
- Best practice: Food preparation staff use a fingernail brush during handwashing.
- Cover your cough or sneeze with a tissue, throw it away, and wash your hands immediately. •Avoid touching your eyes, nose and mouth.

Food Preparation

- Existing best practices for food preparation and storage apply. Coronavirus is not foodborne, but food service workers who are infected can transmit the virus to coworkers or diners.
- Follow the four key steps to food safety: Clean, Separate, Cook, and Chill.
- Best practice: Even while wearing gloves, use clean utensils, such as tongs, spoons, etc., instead of gloved hands to prepare food as much as possible.

Cleaning and Disinfecting Food Contact Surfaces

- Use soap or detergent and water to wash food contact surfaces (i.e., dishware, utensils, trays, food preparation surfaces, beverage equipment) then rinse after use. Best practice: Disinfect food contact surfaces before food preparation. Ensure any disinfectants used appear on EPA’s Registered Antimicrobial Products for Use Against Novel Coronavirus SARS-CoV-2 and are safe for food contact surfaces. Follow manufacturer instructions.
- Let dishware and equipment air dry; do not dry with towels.
- Ensure that dishwasher machines are operating within the manufacturer’s specifications and that appropriate water temperatures, detergents, and sanitizers are being used.

Cleaning and Disinfecting Non-Food Contact Surfaces

- Clean and disinfect frequently touched non-food contact surfaces in the kitchen and dining area at least daily. Best practice: Clean and disinfect the dining area before and after each use.
- Clean and disinfect non-food contact surfaces in the kitchen and dining area’s commonly touched surfaces (e.g., counters, tables, chairs, coffee pot handles) daily. Best practice: Clean and disinfect commonly touched surfaces before and after each use.
- If hard non-porous surfaces are visibly dirty, clean them with detergent or soap and water before disinfecting.
- Disinfect hard non-porous surfaces using:
 - EPA’s Registered Antimicrobial Products for Use Against Novel Coronavirus SARS-CoV-2.
 - Diluted household bleach products. Add 5 tablespoons (1/3 cup) of bleach to a gallon of water or 4 teaspoons of bleach to a quart of water. Do not use in conjunction with ammonia-based solutions. Mix a new bleach-based solution each day, when the liquid has debris in it, and when the solutions parts per million fall below state guidelines.
 - Alcohol-based solutions containing at least 70% alcohol.
- If still in use, clean and disinfect condiment dispensers as frequently as practicable.
- If soft or porous surfaces (e.g., fabric seats, upholstery) are visibly dirty, clean them using appropriate cleaners.
- Disinfect soft or porous surfaces using EPA’s Registered Antimicrobial Products for Use Against Novel Coronavirus SARS-CoV-2.

- If frequently touched electronic surfaces (e.g., equipment controls, lights) are visibly dirty, clean them using products appropriate for use on electronics.
- Disinfect electronic surfaces according to the manufacturer’s recommendations. If none exist, use alcohol-based solutions containing at least 70% alcohol.
- Remove and dispose of gloves, facemasks, and gowns/aprons (if applicable) immediately after cleaning and disinfecting or when visibly soiled.
- Immediately after cleaning and disinfecting (and before taking breaks), wash hands using soap and water for at least 20 seconds. If a handwashing station is not available, disinfect hands using alcohol-based hand sanitizer.
- If disposable gowns are not worn, immediately launder clothes (or uniform) worn using the warmest appropriate water and dry completely. Wash hands immediately after handling dirty laundry.
- For more information, follow CDC guidance on cleaning and disinfecting.

DINERS

- Do not attend meals if you are sick or experiencing flu-like symptoms. Inform a counselor immediately and go to the camp health center.
- Wash hands with soap and water for 20 seconds or use alcohol-based hand sanitizer containing at least 60% alcohol upon entry to the dining area.
- Avoid touching frequently touched surfaces such as handles, doorknobs, tables, and counters as much as possible.
- When retrieving food, avoid touching items and putting them back.
- Maintain physical distance and increased spacing between yourself and others whenever possible.
- Sit with or near the same individuals each meal and/or in the same seat if possible.
- If the option is available, eat outside or in areas with less people.
- When in line, maintain physical distance and increase spacing between yourself and others.
- Cover your cough or sneeze with good cough and sneeze etiquette. If a tissue or napkin is used throw it away and wash your hands immediately.
- Avoid touching your eyes, nose, and mouth.
- Best practice: Use utensils rather than hands to eat as much as possible.

Appropriate and effective cleaning and disinfectant supplies have been purchased and are available for use in accordance with product labels, safety data sheets and manufacturer specifications, and are being used with required personal protective equipment for the product. Hand soap and sanitizers along with spray bottles with disinfectant and paper towels are placed throughout the property.

Camp Voyageur’s protocols for workplace cleaning and disinfectant are from the Field Guide for Camps and Implementation of CDC Guidance, which was prepared for the American Camp Association and YMCA of the USA by Environmental Health & Engineering, Inc. on May 18, 2020:

To minimize transfer of coronavirus at camp, cleaning methods can be employed to reduce risk to clients and camp staff. Cleaning methods should follow the Centers for Disease Control and Prevention (CDC) guidance, such as Interim Guidance for Administrators of U.S. K-12 Schools and Child Care Programs and CDC Guidance for Child Care Programs that Remain Open.

Recommended methods for typical cleaning procedures include two-stage cleaning and disinfecting. “Cleaning” entails washing with a detergent and water to remove soil, organic matter, and some microorganisms from a surface. Following a detergent and water wash, “disinfecting” entails use of a U.S. Environmental Protection Agency (EPA)-approved disinfectant that must be applied in accordance with product manufacturer guidelines. Refer to the EPA List of Disinfectants for Use Against SARS-CoV2: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>. A dilute bleach solution can be substituted for EPA-

approved disinfectants. Avoid use of disinfectants on objects that may go in the mouth, such as toys for young children. See “Cleaning Solution Selection and Preparation” below for more detail on cleaning products.

INCREASED FREQUENCY OF CLEANING

Communal Spaces

- Good practice: Cleaning and disinfecting communal spaces at least daily.
- Best practice: Cleaning and disinfecting of communal spaces between groups. Disinfection after cleaning may not be feasible if scheduling of group activities does not allow for disinfectant to remain on treated surfaces for sufficient time to fully disinfect.

Shared Items

- Good practice: Cleaning and disinfecting of shared items between uses.
- Best practice: Assigning items where possible to reduce the quantity of items shared. Also, cleaning and disinfecting of shared items between uses.

Frequently Touched Surfaces

- Good practice: Cleaning and disinfecting frequently touched surfaces and common spaces at least daily.
- Best practice: Cleaning and disinfecting frequently touched surfaces and common spaces multiple times daily.

Examples of frequently touched surfaces include tables, drinking fountains, door handles, hand railings, light switches, countertops, cabinet handles, desks, phones, keyboards, toilets, faucets, and sinks. Any other surfaces frequently touched by clients or staff should be cleaned and disinfected at least daily or, preferably, several times per day.

Cleaning of outdoor structures made of plastic or metal can be carried out according to typical camp cleaning practices. More frequent cleaning of high touch outdoor surfaces, such as grab bars or railings, is recommended. Outdoor wooden surfaces, such as play structures or benches, can be cleaned according to standard camp practices and more frequently if needed to remove obvious soiling.

Changing Areas/Locker Rooms

- Good practice: As with other frequently touched surfaces, changing areas or locker rooms are cleaned and disinfected daily.
- Better practice: High touch surfaces within changing areas or locker rooms are cleaned more than once per day.
- Best practice: High touch surfaces in changing areas and locker rooms are cleaned between users.

Toilets, Showers, Restrooms

- Good practice: As with other frequently touched surfaces, toilets, showers, and restrooms are cleaned and disinfected daily.
- Better practice: High touch surfaces including toilets, showers, and restrooms are cleaned and disinfected more than once per day.
- Best practice: High touch surfaces including toilets, showers, and restrooms are cleaned and disinfected between users.

PERSONAL PROTECTIVE EQUIPMENT (PPE) FOR CLEANING STAFF

Always refer to the Safety Data Sheet (SDS) of the product or products being used to obtain PPE requirements.

- Good practice: Eye protection and gloves must be worn when preparing cleaning solutions, including dilute bleach solutions.

- Better practice: Eye protection, disposable gloves, and gowns/aprons are worn for all tasks in the cleaning process, including handling trash.
- When finished, all cleaning staff must remove gowns/aprons first, being careful not to contaminate the surrounding area. Next gloves are to be removed by grasping from the inside and peeling inside out. Hands must be thoroughly washed for at least 20 seconds using soap and water. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.

CLEANING METHODS

Cleaning Solution Selection and Preparation

For cleaning, general purpose residential cleaners that are ready to use or diluted with water per product instructions are sufficient and should be used according to manufacturer's instructions.

For disinfection, products that are specific to coronavirus, that have an "emerging viral pathogen" claim, and that require less than one minute of contact time are preferred. Make sure products have not passed their expiration date. If disinfecting products are not available, a dilute bleach solution can be used, comprising four teaspoons of bleach to a quart of water.

Many disinfecting products can be skin and respiratory irritants. Green Seal, a non-profit certification organization, recommends selecting products with the following active ingredients:

- Hydrogen peroxide
- Citric acid
- Lactic acid
- Ethyl alcohol (also called ethanol)
- Isopropyl alcohol (70%)
- Hypochlorous acid

NOTE: Many of the products on the EPA list contain either quaternary ammonium or sodium hypochlorite (also known as bleach). Cleaning products containing these two ingredients should not be used together or even in series, meaning one after the other. Disinfectant products should be kept out of reach of children and used according to the guidelines provided by the manufacturer

Prepare Detergent Spray Solution

- 1.Any staff member preparing spray bottles with detergent must wear eye protection/goggles and gloves.
- 2.Using the manufacturer's instructions, fill spray bottle with the appropriate amount of detergent solution and water, if the manufacturer recommends dilution. A funnel (not to be used for consumables) can be used to reduce spills and splashing.
- 3.Replace the spray cap and label the detergent bottle with the contents using a permanent marker. 4.The detergent manufacturer's instructions must be provided to all staff carrying out cleaning activities, and applicable Safety Data Sheets must be kept on file.

Prepare Disinfectant Spray Solution

- 1.Any staff member preparing spray bottles with disinfectant must wear eye protection/goggles and gloves and follow manufacturer's instructions.
- 2.Using the manufacturer's instructions, fill spray bottle with the appropriate amount of disinfectant solution and water, if the manufacturer recommends dilution. A funnel (not to be used for consumables) can be used to reduce spills and splashing.
- 3.A dilute bleach (sodium hypochlorite) solution can be used by adding 4 teaspoons of bleach per quart of water.

4. Replace the spray cap and label the disinfectant bottle with the contents using a permanent marker. 5. The disinfectant manufacturer's instructions must be provided to all staff carrying out cleaning activities, and applicable Safety Data Sheets must be kept on file.

Typical Cleaning for Non-Porous Surfaces

1. Cleaning staff should wear eye protection and disposable gloves.
2. Using a detergent cleaning solution, spray 6 to 8 inches from the non-porous surface and wipe with clean paper towels (or according to manufacturer's instructions) to remove visible contamination, if present.
3. Make sure the surface is dry before applying disinfectant.
4. Review the instructions provided by the disinfectant manufacturer to note the concentration, application method, and necessary contact time. This will vary by product and type of cleaning activity.
5. Allow the disinfectant to remain on the surface for the instructed time and wipe with paper towels.
6. After a cleaning task is complete, remove the gown followed by the gloves and dispose, as discussed in the "PPE for Cleaning Staff" section above. Carefully wash hands for at least 20 seconds with soap and water as described in the PPE section. Hand sanitizer may be used if water is not available and no visible dirt is observed on hands.
7. Reusable aprons or work clothing may be used, if laundered or washed after use.

Typical Cleaning for Porous Surfaces

CDC recommends removing or limiting use of soft and porous materials, such as area rugs and couches, as they are more difficult to clean and disinfect.

At this time few products for use on porous surfaces are EPA approved. Products identified contain the active ingredients quaternary ammonium and hydrogen peroxide, both of which should be used carefully by trained staff. In addition, some products' manufacturer's instructions note that they are not approved for use in California.

1. Eye protection and gloves should be worn during cleaning activities.
2. First remove visible contamination, if present, and clean with appropriate cleaners indicated for use on porous surfaces.
3. Launder items, if applicable, in accordance with the manufacturer's instructions using the warmest appropriate water setting for the items and then dry items completely. See Laundry section below.
4. Otherwise, use disinfectant products suitable for porous surfaces. NOTE: If some porous surfaces are not suitable for cleaning with disinfectants, then clean them as much as possible and attach a sign to them saying they are not to be used or touched for three days.

WHAT TO DO IF THERE IS A CONFIRMED OR PROBABLE CASE OF COVID-19

If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary. Continue routine cleaning and disinfection. If less than 7 days, close off areas that were used by the person who is sick and carry out the following:

- Open outside doors and windows to increase air circulation in the areas, if possible.
- Wait up to 24 hours or as long as practical before you clean or disinfect the space to allow respiratory droplets to settle before cleaning and disinfecting. Outdoor venues and equipment could be cleaned without delay.
- Clean and disinfect all areas used by the person who is sick. Run ventilation system during cleaning.
- Use dedicated cleaning and disinfecting materials to disinfect a potential source area (e.g., an infected client's cabin or bunk area). The cleaning equipment should not be used to clean other areas until they are thoroughly cleaned and disinfected.
- Enhanced cleaning is recommended if it is determined that a person with COVID-19 was present in a building (e.g., dining hall, gym, bunk, etc.) or at camp activity areas for at least 15 minutes.

For a suspected or confirmed COVID-19 case, the following enhanced cleaning protocol should be followed:

- First clean visibly dirty surfaces then perform disinfection. For specific cleaning instructions see sections above: “Typical Cleaning for Non-Porous Surfaces” and “Typical Cleaning for Porous Surfaces.” NOTE: Products that are specific to coronavirus, have an “emerging viral pathogen” claim, and require less than 1 minute of contact time are preferred. Make sure products have not passed their expiration date.
 - Use disposable wipes/paper towels to clean surfaces if possible, rather than reusable cloth wipes, as the latter can re-contaminate surfaces. All cleaning and disinfecting materials (e.g., paper towels, cloth wipers, sponges, mop heads, etc.) should be disposed in sealed bags or containers after use.
 - In each area, pay particular attention to high touch areas, including, but not limited to, handrails, door handles, cabinet and drawer handles, shared sports equipment or craft tools.
 - Clean and disinfect an area extending 12 feet in all directions around the client’s sleeping quarters, focusing on all horizontal surfaces and high touch objects. Clean and disinfect areas identified as locations visited by the individual who is sick or that the individual used or occupied, including the entire bathroom and any common or activities areas. These include high touch objects in common areas including handrails, exterior door entry handles, cabinet handles, and restroom door handles, as well as crafting tools or sports equipment.
 - Use dedicated cleaning and disinfecting materials to disinfect a potential source area. These materials should not be used to clean other areas until they are thoroughly cleaned and disinfected.
 - Clean a potential source area by progressing from the entrance to the most distant point to avoid re-contaminating surfaces that have been disinfected (i.e., clean your way out).
 - Clean soft and porous surfaces such as carpeted floor, rugs, and drapes also using the procedure noted above for porous surfaces. NOTE: If some porous surfaces are not suitable for cleaning with disinfectants, then clean them as much as possible and attach a sign to them saying they are not to be used or touched for three days.
- Personal Protective Equipment (PPE)
- Cleaning staff should wear eye protection, disposable gloves, facemask, and gowns/aprons for all tasks in the enhanced cleaning process, including handling trash.
 - Gloves and gowns/aprons should be compatible with the disinfectant products being used.
 - Facemask should be disposable and used for the enhanced cleaning only.
 - Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash, for example a face shield.
 - Gloves and gowns/aprons should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to clean hands after removing gloves.
 - Gloves should be removed after cleaning a room or area occupied by ill persons. Clean hands immediately after gloves are removed.
 - Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor.
 - Cleaning staff and others should clean hands often, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.

MISCELLANEOUS CLEANING

Dining Hall/Cafeteria

See guidance for non-porous surfaces above and in food service section.

Cleaning of Keyboards, Laptops and Electronic Equipment

- Follow manufacturer guidelines for cleaning electronic equipment.
- Use of covers that can be cleaned and disinfected are recommended.
- Alcohol based wipes or sprays containing at least 70% alcohol can be used to disinfect electronics, including touch screens.

Shared Equipment

- Ensure adequate supplies to minimize sharing of high touch materials to the extent possible (art supplies, equipment, etc. assigned to a single client) or limit use of supplies and equipment by one group of clients at a time and clean and disinfect between use.
- Good: Shared equipment should be cleaned and disinfected at least daily.
- Better: Shared equipment should be cleaned and disinfected multiple times per day.
- Best: Shared equipment should be cleaned and disinfected between uses.

Playground Equipment

- Good: Playground equipment should be cleaned and disinfected at least daily.
- Better: Playground equipment should be cleaned and disinfected multiple times per day.
- Best: Playground equipment should be cleaned and disinfected between uses.

LAUNDRY

- As with other cleaning activities, gloves and gowns/aprons are recommended when doing laundry. Facemasks are also recommended.
- Staff should avoid shaking laundry items to minimize potential spreading of virus-laden particles into the air.
- Use of a disinfectant appropriate for porous material is recommended. Follow manufacturer's instructions. Example: Lysol Laundry Sanitizer (see manufacturer's instructions for inactivating viruses, including a 15-minute presoak).
- Wash items as appropriate in accordance with the manufacturer's instructions, opting for the warmest appropriate water setting for the items and dry items completely.
- Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.
- Cloth face coverings used by staff and/or clients should be laundered regularly. Used face coverings should be collected in a sealable container (like a trash bag) until laundered. In general, staff should avoid handling clients' belongings. If handling of clients' belongings is needed, gloves should be worn; disposable gloves are recommended, if available. If gloves are unavailable, staff should perform hand hygiene immediately before and after handling clients' belongings.

TESTING

- Good practice (minimum): Use of EPA approved cleaning and disinfecting products; CDC recommended cleaning protocols; and maintenance of cleaning and supply records to ensure proper cleaning activities have been carried out.

6. Drop-off, pick-up and delivery practices and protocols

Delivery drivers are instructed to leave the goods in our Red Ford pickup away from our main sites.

Camp Voyageur is also establishing the following protocols:

1. Drop-off, pick-up or delivery of goods should be made using means that allow for at least six feet of distance between the worker and customer.
2. Order verification must also be made using means that allow for at least six feet of distance or a complete barrier between the worker and customer.
3. Contactless payment should be used whenever possible. If contactless payment is not possible, payment must be made in a manner that allows for at least six feet of distance between the worker and customer.

4. Customers should pre-order goods or pre-arrange the maintenance or repair of goods or pet grooming services before traveling to the business.
5. Timing of outdoor drop-off, pick-up and delivery should be pre-arranged and arrival at the drop-off, pick-up or delivery location should be communicated through voice, text or email messaging.
6. Customers should be asked to wear cloth face masks.
7. Drop-off and pick-up locations should allow for six feet of social distance between customers and minimize contact with car surfaces.

7. Communications, training and supervision practices and protocols

This COVID-19 Preparedness Plan was communicated via email to all workers 5/25/20 and necessary training will be provided upon arrival of staff on or after 6/1/20. Staff will be given this manual to study and become familiar with our plan. Staff will also be familiarized with the Field Guide for Camps and Implementation of CDC Guidance, which was prepared for the American Camp Association and YMCA of the USA by Environmental Health & Engineering, Inc. on May 18, 2020. Managers and supervisors are to monitor how effective the program has been implemented by daily informal assessments and weekly formal staff meetings. Management and workers are to work through this new program together and update the training as necessary. This COVID-19 Preparedness Plan has been certified by Camp Voyageur management and was posted throughout the workplace 5/25/20. It will be updated as necessary.

8. What customers and clients can do to minimize transmission of COVID-19

Customers and clients are asked to comply with our Preparedness Plan. In accordance with the CDC, clients are also asked to:

Know about COVID-19

- Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person.
- The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.
- COVID-19 symptoms can range from mild (or no symptoms) to severe illness.

Know how COVID-19 is spread

- You can become infected by coming into close contact (about 6 feet or two arm lengths) with a person who has COVID-19. COVID-19 is primarily spread from person to person.
- You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks.
- You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.

Protect yourself and others from COVID-19

- There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.
- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public settings.
- Clean and disinfect frequently touched surfaces.
- Wash your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.

Practice social distancing

- Buy groceries and medicine, go to the doctor, and complete banking activities online when possible.

- If you must go in person, stay at least 6 feet away from others and disinfect items you must touch.
- Get deliveries and takeout, and limit in-person contact as much as possible.

Prevent the spread of COVID-19 if you are sick

- Stay home if you are sick, except to get medical care.
- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from other people and pets in your home.
- There is no specific treatment for COVID-19, but you can seek medical care to help relieve your symptoms.
- If you need medical attention, call ahead.

Know your risk for severe illness

- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk

9. Additional protections and protocols for receiving and exchanging payment

Receiving and exchanging payment will be done either online or via mail.

10. Additional protections and protocols for managing occupancy

All areas of the property will be operating at less than 50% capacity.

11. Additional protections and protocols to limit face-to-face interactions

Groups arriving will form pods and maintain social and physical distance from other pods and staff.

12. Additional protection and protocols for distancing and barriers

Clients are asked to comply with our Preparedness Plan. Additional guidance for clients via the CDC can be found:

General

Centers for Disease Control and Prevention (CDC): Coronavirus (COVID-19) – www.cdc.gov/coronavirus/2019-nCoV

Minnesota Department of Health (MDH): Coronavirus – www.health.state.mn.us/diseases/coronavirus

State of Minnesota: COVID-19 response – <https://mn.gov/covid19>

Businesses

CDC: Resources for businesses and employers – www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html

CDC: General business frequently asked questions – www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html

CDC: Building/business ventilation – www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html

MDH: Businesses and employers: COVID-19 – www.health.state.mn.us/diseases/coronavirus/businesses.html

MDH: Health screening checklist – www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf

MDH: Materials for businesses and employers – www.health.state.mn.us/diseases/coronavirus/materials

Minnesota Department of Employment and Economic Development (DEED): COVID-19 information and resources – <https://mn.gov/deed/newscenter/covid/>

Minnesota Department of Labor and Industry (DLI): Updates related to COVID-19 – www.dli.mn.gov/updates

Federal OSHA – www.osha.gov

Handwashing

MDH: Handwashing video translated into multiple languages – www.youtube.com/watch?v=LdQuPGVcceg

Respiratory etiquette: Cover your cough or sneeze

CDC: www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html

CDC: www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html

MDH: www.health.state.mn.us/diseases/coronavirus/prevention.html

Social distancing

CDC: www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html

MDH: www.health.state.mn.us/diseases/coronavirus/businesses.html

Housekeeping

CDC: www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html

CDC: www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html

CDC: www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html

Environmental Protection Agency (EPA): www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

Employees exhibiting signs and symptoms of COVID-19

CDC: www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

MDH: www.health.state.mn.us/diseases/coronavirus/basics.html

MDH: www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf

MDH: www.health.state.mn.us/diseases/coronavirus/returntowork.pdf

State of Minnesota – <https://mn.gov/covid19/for-minnesotans/if-sick/get-tested/index.jsp>

Training

CDC: www.cdc.gov/coronavirus/2019-ncov/community/guidance-small-business.html

Federal OSHA: www.osha.gov/Publications/OSHA3990.pdf

MDH: www.health.state.mn.us/diseases/coronavirus/about.pdf

Certified by:

John Erdmann

Camp Director