1. Pre-Camp

All families must...

- (a) Monitor child and other members of the household for a minimum of 14 days (i.e. two weeks) prior to camp. Sign declaration confirming that the camper and all household members have been symptom free for a minimum 14 days prior to camp
- (b) Sign waiver recognizing that camp comes with an increased risk of contacting COVID-19
- (c) Agree to reduce social contact outside their household and their "personal bubble" during week of camp and the 14 days (i.e. two weeks) prior
- (d) Agree that child(ren) will wear personal protective equipment (PPE) (i.e. face shield or mask) throughout the entire camp day

2. Morning of camp (each day)

- (a) If possible, drop off and pick up times will be staggered to limit contact and reduce total number of people
- (b) On the first day, guardians will have to fill out a COVID-19 symptom declaration form stating that the child has not had any symptoms related to COVID-19 and has not come into contact with anyone who is confirmed or suspected to have COVID-19
- (c) Parents should bring their own pen or will be provided with one to keep
- (d) Guardians/ anyone dropping the camper off at camp will be required to fill out a contact form (name, phone number, email, symptom declaration?)
- (e) Campers will then be signed in and asked to sanitize/wash their hands and put on their face shield/mask

3. Throughout Camp Day

- (a) General physical distancing measures will apply. Campers will be asked to stay 6 ft apart from others and staff unless in an emergency. Group activities will cater towards physical distancing regulations
- (b) Campers will be assigned to a group of 5-6 campers who they will be doing activities with throughout the week. This is to allow staff to better enforce physical distancing rules.
- (c) Campers are required to bring their own food and water for the day. There will be no sharing of food and no access to communal water.
- (d) Campers will be given their own set of supplies to use for each activity and sharing will not be allowed
- (e) Frequent handwashing will be done especially before and after activities, meals, and using washroom facilities
 - i. Handwashing must be done with soap and water for a minimum of 20 seconds
 - ii. Sanitizer may be used as long as it has an alcohol concentration of at least 60%



4. First Aid Incidents – Derived from the Lifesaving Society BC & Yukon

- (a) Due to the nature of COVID-19 as an aerosol transmitted pathogen, first aid protocols have been categorized into low-risk and high-risk categories
 - Low-risk includes anything that does not generate aerosol during the protocol
 - High-risk includes treatments that do generate aerosol
 - Examples: chest compressions, ventilations, abdominal thrusts/back blows
- (b) If a camper or staff member becomes injured or is in need of medical attention, the First Aid attendant will be assessing the situation and categorizing it as low-risk or high-risk using the appropriate PPE (as displayed in Appendix A)
- (c) The following are COVID-19 adaptations of assessment and treatment protocols that should be performed in conjunction with specific interventions required by the camper's condition
 - Scene & Risk Assessment:
 - Ensure scene is safe
 - Minimize the number of rescuer contacts with camper
 - Maintain physical distancing of 2m wherever possible
 - Manage/mitigate any hazards/risks
 - Assess victim health history regarding COVID-19
 - Continuous and dynamic scene assessment
 - Primary Assessment:
 - Determine if camper's condition requires direct contact or indirect treatment (Follow decision tree in Appendix B)
 - Promote self-treatment or treatment by a family member wherever possible
 - Don the appropriate PPE to the level of victim contact and first aid treatment required (Appendix A, C & D)
 - Regardless of direct or indirect contact, proper hand hygiene is important following all first aid treatment
 - Secondary Assessment:
 - Only vital signs that can be observed from a distance (ex., skin colour, visual breathing check) or are required for victim treatment decisions (ex., skin temperature of a possible heat stroke victim) will be taken
 - Head-to-toe exam should be encouraged to do indirectly
 - Campers who can walk to the ambulance should be encouraged to do so to reduce the risk of COVID-19 transmission
 - Post Rescue Process:
 - Take care to remove and dispose of PPE in a safe manner (Appendix C & D)
 - Disinfect all surfaces that may have come in contact with the victim or rescuer during treatment (ex., chair, bed, clipboard, etc.)
 - Where required, practice personal decontamination



5. In Case of a Camper/staff who shows symptoms –

Outbreak Procedure Stage 1:

- (a) They will immediately be removed from the group and monitored at a safe distance.
- (b) The child's parents/guardians will be contacted and asked to immediately pick the camper up.
- (c) We will require the camper to be tested for COVID-19 and will not return until a negative test result has been declared and symptoms have cleared.
- (d) Guardians and staff must notify the Youth Program Manager of a positive test result.
- (e) Whether guardians of the non-symptomatic campers will be notified of the situation will be determined by the provincial health authority.
- (f) Once a camper has presented symptoms, non-symptomatic campers will be moved to a clean room or area (likely outdoors) where they will maintain physical distance (2 meters apart) and will be supervised by 2 staff. The remaining staff will do an immediate and thorough cleaning of camp spaces.
- (g) Camp staff will notify venue representatives/liaisons of the potential outbreak.
- (h) Camp staff will proceed to contact 811 and the regional health authority (e.g. Coastal, Fraser, Interior, Northern Health etc.) on how to proceed.
- (i) Depending on the camper's/staff's symptoms and level of potential exposure, the Youth Program Manager may make the decision to cease all camp activities and end the camp entirely for the health and safety of campers, staff, and their families. The decision to end camp entirely will be based on the advice of the regional health authority.
 - At any point, parents can decide to pull their child(ren) from camp

6. In Case of confirmed case of COVID-19 – *Outbreak Procedure Stage 2:*

- (a) All families will be notified either by the BC Centre of Disease Control (BCCDC)
- (b) BCWF will follow the direction of the Health authority as to what measures are appropriate to take regarding the situation
- (c) BCWF is not responsible for contact tracing but will provide all the information required by the BCCDC to trace camp contacts.



7. BCWF Cleaning Policy – Derived from the BC Camping Guidelines

(a) Cleaning and Disinfecting

- i. Buildings should be generally cleaned and disinfected daily.
- ii. High contact surfaces (e.g. shared equipment, doorknobs, light switches, tabletops) should be cleaned and disinfected a minimum of twice per day.
- iii. Clean and disinfect any surface that is visibly dirty.
- iv. Use commonly available detergents and disinfectants. Follow the label instructions and allow the disinfecting agent to remain wet on the surface for the specified amount of time for equipment or surfaces that cannot be easily disinfected (e.g. climbing wall, stuffed toys).
- v. Increase attention to appropriate hygiene practices (i.e. handwashing).
- vi. Empty garbage containers daily.
- vii. Complete appropriate hand hygiene after cleaning.
- viii. Wash hands before and after wearing gloves.

(b) Outdoor Spaces and Ventilation

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

(c) Physical Markers and Barriers

- i. Install markers (e.g. tape, cones, etc.) to give guidance to campers in settings where they must wait their turn or were previously allowed to gather as a large group.
- ii. Consider installing physical barriers (e.g. plexiglass) where appropriate (e.g. food service).
- iii. Post appropriate signage reminding staff and campers of guidelines or indicating off limits areas. BCCDC Signage.



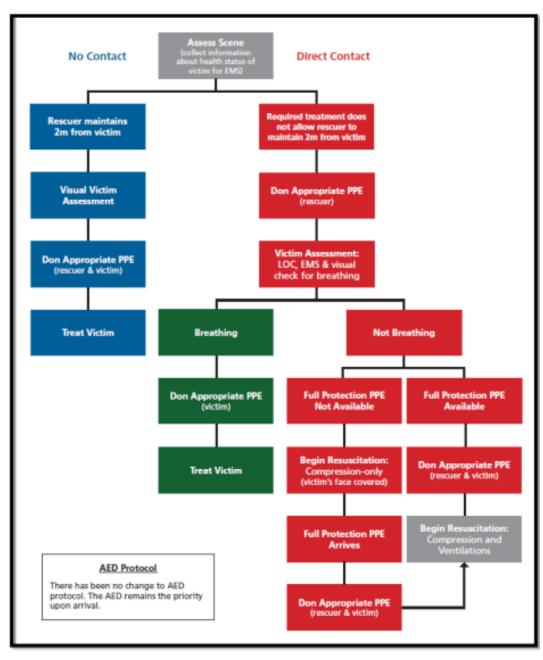
Appendix:

A) Assessing Risk and Identifying Appropriate PPE

NO CONTACT	DIRECT CONTACT	
2m physical distancing is maintained between the rescuer and victim	LOW-RISK Non-aerosol-generating treatment 2m physical distancing will compromise victim outcome	HIGH-RISK Aerosol-generating treatment 2m physical distancing will compromise victim outcome
RESCUER: face shield/goggles, gloves, surgical mask	RESCUER: face shield/goggles, gloves, surgical mask	RESCUER: face shield/goggles, gloves, N95/surgical mask, gown
VICTIM: surgical mask	VICTIM: surgical mask	VICTIM: (in order of preference) BVM with viral filter & continuous seal OR Pocket mask with viral filter & continuous seal OR Non-rebreather face mask with supplemental oxygen and open airway OR Pocket mask with viral filter and tight head strap (single-rescuer only) OR Surgical mask (compression-only CPR)



B) COVID-19 Decision Tree for First-Aid and Resuscitation





C) Donning and Doffing Two Piece PPE for Low-Risk Treatments





D) Donning and Doffing Four Piece PPE for High-Risk Treatments



2

Personal protective equipment, commonly referred to as PPE, is specialized equipment worn to minimize exposure to hazards.

To minimize the risk of contamination, it's very important you put on and take off your PPE safely and in the right sequence.

See the other job aids for further instructions on using procedure masks, gowns, protective eye wear, and gloves.



Perform proper hand hygiene for 20 seconds.



Put on an isolation gown.





Put on a procedure mask.



eyewear.



Put on gloves.

Doffing (Removing)



Peel off gloves and dispose.

Take off protective

if disposable.

eyewear, discarding

Δ



Remove the mask

dispose.

holding on to the ear loops or ties, and

5



Perform proper hand hygiene for 20 seconds



Perform proper hand hygiene for 20 seconds.

6

April 2020



Sources:

- COVID-19 Health and Safety Guidelines Day Camps by the *BC Camps Association*. Updated June 15, 2020.
- COVID-19 Public Health Guidance for Child Care Settings by the *BC Centre for Disease Control*. Updated July 8, 2020.
- COVID-19 Public Health Guidance for K-12 School Settings by the *BC Centre for Disease Control*. Updated July 29, 2020.
- COVID-19 Resuscitation & First Aid Recommendations by the *Lifesaving Society Canada*. Updated 15 May 2020.

This document is subject to change. This document was last edited: August 18, 2020. Editors: Chris Lim, Kelly Halverson, Celine Coschizza, and Natalie Varga

