



COVID-19 Preparedness and Response Plan

Introduction

Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus. It has spread from China to many other countries around the world, including the United States. Depending on the severity of COVID-19's international impacts, outbreak conditions – including those rising to the level of a pandemic – can affect all aspects of daily life, including travel, trade, tourism, food supplies, and financial markets.

To reduce the impact of COVID-19 outbreak conditions on businesses, workers, customers, and the public, it is important for all employers to plan for a COVID-19 Policy and Response Plan. Even during this time of crisis, The Occupational Safety and Health Act requires employers to comply with the safety and health standards and regulations by OSHA or by a state with an OSHA-approved state plan. In addition, the Act's General Duty Clause, Section 5(a)(1), requires Camp Geneva to provide employees with a workplace free from recognized hazards likely to cause death or serious physical harm.

I. Important COVID-19 General Information

Common symptoms

- Cough
- Shortness of breath or difficulty breathing

Or at least two of these symptoms:

- Fever
- Repeated shaking with chills
- Muscle pain
- Sore throat
- Headache
- New loss of taste or smell

Virus spreading – *The virus that causes COVID-19 is thought to spread mainly from person to person, mainly through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Spread is more likely when people are in close contact with one another (within about 6 feet). The virus that causes COVID-19 is [spreading from person-to-person](#). People are thought to be most contagious when they are symptomatic (the sickest). That is why CDC recommends that these patients be isolated either in the hospital or at home (depending on how sick they are) until they are better and no longer pose a risk of infecting others. (CDC, 04/21/20)*

COVID-19 is primarily spread through respiratory droplets, meaning you generally must be within six feet of someone who is contagious and come into contact with these droplets. It may be possible to get COVID-19 by touching a surface or object that has the virus on it and then touching your mouth, nose, or eyes.

Are children high risk for Covid-19? - *Based on available evidence, children do not appear to be at higher risk for COVID-19 than adults. While some children and infants have been sick with COVID-19, adults make up most of the known cases to date. You can learn more about who is at higher risk for severe illness from COVID-19 at [People who are at higher risk for severe illness](#). (CDC, 04/21/20) Although children rarely get seriously ill from COVID-19, there appears to be an offshoot that's more prevalent among young people – a rare Kawasaki disease-like syndrome that causes fever, rashes and an inflammatory process that can be serious.*

Are children's symptoms different? *No. The symptoms of COVID-19 are similar in children and adults. However, children with confirmed COVID-19 have generally presented with mild symptoms. Reported symptoms in children include cold-like symptoms, such as fever, runny nose, and cough. Vomiting and diarrhea have also been reported. It's not known yet whether some children may be at higher risk for severe illness, for example, children with underlying medical conditions and special healthcare needs. There is much more to be learned about how the disease impacts children. (CDC, 04/21/20)*

II. Returning to Work guidelines for Year-Round Staff

Cleaning

- Cleaning requirements at Camp Geneva
 - All commonly used and touched surfaces must be cleaned and sanitized in the office once per workday including the copier, counters, phones, center island, doorknobs, bathrooms, etc. Commonly touched surfaces in the kitchens must be cleaned as well including the microwave, coffee machine, etc.
 - Bathrooms must have stocked soap by the sinks and paper towel and be sanitized daily. All employees must wash their hands often.
 - Keep hand sanitizer and disinfectant wipes stocked in office or common areas for employees and guests to use.

Work restrictions - the following guidelines apply:

- Keep a six-foot distance between people as much as possible.
- Masks are required in the office unless sitting at a workstation or in a private office.
- Continue to meet virtually and utilize phone and zoom when possible to reduce non-socially distant interactions. For now, work that can be done remotely, should continue to be done remotely.
- Camp Geneva will follow state mandated guidelines and camp licensing including maximum gathering sizes.
- Wash hands frequently and use hand sanitizer and disinfectant wipes as needed for protection.

Communication

- Camp Geneva will do its best to keep people informed and up to date as things progress and change. Camp Geneva intends to continue weekly staff meetings and prayer time. These times are for asking questions or for clarifications on things. Reach out to your director/supervisor if you have questions or concerns.

Classifying Worker Exposure to COVID-19

- The four risk classifications levels are:
 - Lower Risk (caution)
 - Medium
 - High
 - Very High
- The level of risk depends in part on the industry type, need for contact within 6 feet of people known to be, or suspected of being, infected with SARS-CoV-2, or requirement for repeated or extended contact with persons known to be, or suspected of being, infected with SARS-CoV-2. Reference: “Worker Exposure Risk to COVID-19”
<https://www.osha.gov/Publications/OSHA3993.pdf>
- Using the above reference, Camp Geneva is considered the “Lower Exposure Risk (Caution)” because workers have minimal occupational contact with the public and other coworkers.
- We interpret this to change to Medium Risk when campers arrive on site.

III. If you are sick

You MUST stay home if:

- You have a fever of 100.4 or higher. Accuracy range of thermometers should be subtracted from 100.4 to safely determine this.
- You feel severe body aches due to sickness.
- You have a severe cough, especially if it is combined with a fever or body aches.
- After the above symptoms, you may not return to work until:
 - After 72 hours of no fever without the use of fever reducing medicine, and
 - Improvement in respiratory symptoms (coughing, shortness of breath, etc), and
 - At least 7 days have passed since first symptoms appeared.
- Or you may return to work after 24 hours of no fever without the use of fever reducing medicine, improvement in respiratory conditions, and a negative COVID-19 test
- A housemate becomes infected with COVID-19. You may return to work after a 14-day isolation period or you have been tested negative for COVID-19.
- An on-site sick employee exhibiting any signs or symptoms of COVID-19 will be moved to an isolation room until they can move home and be removed from the work site. The isolation room must be cleaned properly once empty.

If you have an exposure to somebody with confirmed COVID-19 then you may not come in to work. You must quarantine yourself and you may not return to work until you have waited five days (per health department guidance) and then received a negative COVID-19 test.

IV. Information

Camp Geneva's policy is put in place based on the websites mentioned here-in and the recommendations of the CDC, State of Michigan Licensing (LARA) and the Ottawa County Health Department. Changes in the policy can or will occur as new information from these nationally known resources are made available.

If there are any questions regarding any information in the policy or in the information provided from these sites, please let us know and we will do our best to assist with your situation.

This is a LIVING document that will change as best practices emerge.

Notes for clarification:

- *Cabin Group = Smallest group, 10 campers or less*
- *Cluster = Approximately 3 cabin groups*

The procedures outlined below are guided by the State of Michigan LARA regulations and ACA accreditation standards.

8.0 Campers and Staff

(Note: section 8.0 is out of order and moved to this point because it provides context for other sections.)

- **Definitions**

- **Household = Cabin Group = Smallest group, 10 campers or less**
- **Cohort = Cluster = Approximately 3 cabin groups**
- **Note: Cabin groups and Cluster Sizes are ultimately determined by State and Local governing agencies and are subject to change**

- **Cabin Group**

- A cabin group is a group of people that do not intermix with other groups or leave camp, thus being able to spend time together without practicing social distancing between them
 - It is advised that this group still refrains from physical contact with each other, refrains from sharing water bottles, and practice diligent hygiene especially thorough and often handwashing.
 - Cabin groups will eat with only their cabin group in their designated area
 - It is advised to spend as much time outdoors as possible in each day
 - Cabin groups will use their specified cabin bathrooms and not use other cabin bathrooms. Best practice is to refrain from using public bathrooms as much as possible.
- A cluster is made up of up to 3 cabin groups. The three cabin groups that make up a cluster may be in a same space if the following is practiced:
 - The cabin groups that make up the party do not change
 - They adhere to strict social distancing from one group to another

- They do not share the same bathroom
 - They clean surfaces between each cabin groups' use
 - If they are in the same space indoors, face coverings must be worn, or if they are in an outdoor space in which social distancing is not practical, they must wear a face covering and wash/sterilize hands before interacting.
- Staff divisions
 - Staff cabin group - Staff dedicated to living on site, staying on site and sticking to healthy practices may be part of the Staff cabin group and is subject to the following restrictions and privileges:
 - They may interact with other staff within the Staff cabin group in the evenings and mornings without socially distancing.
 - They are not allowed to go in the kitchen.
 - Other than meals and within their dedicated cabin space, they must wear masks when inside buildings with others and sanitize hands upon entry.
 - If staff need to go somewhere on their time off, they must wear a mask when social distancing is not possible and always in a public, indoor space.
 - Staff cabin groups should follow the governor's executive orders with regards to maximum group size.
 - Non-Staff cabin group – Staff who have not gone through the screening and restrictions of those within the Staff cabin group must stay socially distant from those within the Staff cabin group.
 - They must wear a mask when they are in an enclosed public space.
 - They may not enter the kitchen.
 - Meals will be served outside when possible. Non-staff cabin group individuals will have picnic tables or places outside where they can eat their food. On rainy or cold days, they will need to eat meals in their living areas, other separate areas or in pre-approved shifts in the dining hall.
 - Non-Staff cabin group individuals will use their lodging bathrooms for them that will be cleaned daily according to proper cleaning and sterilizing procedures.
- **Spaces at Camp**
 - Cabin group Spaces
 - The campers will have primary spaces where they can live freely

- Groups from cabin group cannot intermingle inside others' cabins
 - The only bathrooms that may be used by people inside their cabins is the bathrooms inside their assigned cabin
 - Cabin groups will have specific doors/tables/spaces assigned to them in dining hall that they must use and not deviate from. However, eating outside will always be the best practice.
- Cleaning
 - Reserved for pre-identified summer staff and year-round staff
 - Areas will need to be cleaned on a regular basis based on [CDC cleaning guidelines for childcare](#)
- Kitchen
 - This space will be controlled and limited to only a certain group of people. See the Food section of this document.
- Public spaces
 - Must be designated in advance and will let the cleaning crew know so they can disinfect after use
 - There will be other outdoor spaces at camp that we will designate for certain cabin groups and clusters to minimize the spread of germs and constant cleaning
- **Campers and staff with preexisting conditions**
 - Campers and staff that are at higher risk of infection are advised to have a prescreening by their primary care doctor BEFORE arriving to camp in order to determine if they should attend camp.

1.0 Communication

- I. Primary Contact/Camp Leadership – each program's primary contact (or designate) for parents, campers, and staff will be the Program Director and Program Coordinator. They will coordinate with the main point of contact (POC), GENEVA's office manager. The office manager will work closely with the executive director.
- II. Primary contacts or camp leadership should communicate to LARA and OCHD representatives when program will be opening.
- III. Communicate this plan with parents before their child's arrival to camp.
- IV. Signs
 - a. Handwashing signs in bathrooms
 - b. "Cough" and "Stop the spread of germs" signs in each cabin group home cabin area.
- V. Opening day camp group and overnight group orientation with campers should include:
 - a. What we are doing to keep campers safe

- b. Handwashing guidelines and importance
 - c. Not touching your face
 - d. Guidelines for behavior within day camp groups, clusters, and between groups.
 - (ie) social distancing guidelines and expectations
 - e. Bathrooms available to use.
 - f. Address common misconceptions about coronavirus.
- VI. Conversations with campers while at camp:
- a. Counselors should encourage campers to talk openly about how they are feeling. Leadership to help equip counselors for these types of conversations. We will do this throughout staff-orientation.
 - b. Counselors to be equipped to provide accurate and honest information. Counselors should not be making speculations or assumptions. It is okay to say “I do not know”.
- VII. In the event of a camper or staff member exhibiting potential COVID-19 symptoms:
- a. The individual will be asked to put on a face mask and will be isolated from others, generally in a separate room.
 - b. The health care person attending the patient will wear an N95 mask or respirator, face shield or eye protection, disposable gloves and gown or apron.
 - c. Camp management and guardians will be notified.
 - d. Further assessment will be sought from an appropriate healthcare provider with direction from camper parents/guardians.
 - e. If COVID-19 is not ruled out, the Ottawa County Health Department will be notified.
 - f. A plan will be made for a camper with a suspected communicable disease to be removed from camp by parents/guardians as soon as possible. In the meantime, they will be isolated from the rest of camp in a quarantine area.
 - g. Staff suspected of illness will work with camp management to either leave camp or be isolated if leaving is not feasible.
 - h. A trained disinfection crew led by head housekeeper will remove the patient’s belongings from their cabin and disinfect the area, as described in the disinfection section.
 - i. It will be determined where the patient has been indoors in the past 48 hours and those areas will also be disinfected.
 - j. Basic contact tracing will be done on-campus; those who have been in close contact with the patient (within 6 feet) for at least 15 minutes in the last 48 hours will be observed. Guardians of those campers will be notified and encouraged to screen and watch for symptoms closely. Contact will be written by GENEVA leadership staff.
 - k. We will communicate with parents when:
 - i. A child in their cabin group was sent home ill with COVID-19 type symptoms

- ii. A child in their cabin group returned to camp and was not admitted through screening.
- I. If a staff or camper is tested positive for COVID-19, we will work in coordination with the health department to coordinate communication with families.

VIII. Staff Communication:

- a. Prior to Camp-
 - i. The program team will provide training and educational material, include this document, to all staff.
 - 1. Explain what responsibilities we each have as they relate specifically to COVID-19. (ie- who is the designate or primary contact for all communication related to COVID-19)
 - 2. Communicate what are the roles of each staff member as they relate to COVID-19
 - 3. Communicate workplace controls and the expectations around the use of Personal Protective Equipment (PPE)
 - 4. Staff have an obligation to notify camp administration of exposure or signs/symptoms of COVID-19.
 - ii. The program team and Camp health officers should obtain a health history form from all staff and ascertain which staff are at higher-risk for complications related to COVID-19. Determine if these staff members should not work as counselors or have a role where they could have prolonged direct contact with campers. Identify alternative job duties for these staff members, if warranted.
 - iii. Camp leadership team will communicate the importance of vigilantly monitoring their health for symptoms associated with COVID-19. (See protocols and expectations above)
 - iv. Employees may not be discharged, disciplined, or otherwise retaliated against for staying home when he or she is at particular risk for infecting others with COVID-19 for the duration of the states of emergency and disaster.
 - v. Staff are encouraged to get tested to assure that they have had a negative diagnostic test for COVID-19 completed within the last 10 days.
 - vi. Before arriving, staff can find a testing location in their community by visiting [Michigan.gov/coronavirustest](https://www.michigan.gov/coronavirustest).
 - vii. If cost is a barrier, the state of Michigan also provides a list of locations that are providing testing at no cost.
 - viii. Staff should assure that they have been tested and the result was negative, but they should not be required to submit documentation of their test result.

- ix. Testing does not eliminate the need to implement the prevention measures outlined in this document. Someone can still become infectious or become infected with COVID-19 after the testing, but this is one imperfect step taken to screen out someone with active infection prior to coming to camp.
 - b. During Camp-
 - i. Camp leadership will need to continue to keep staff informed of updated procedures and protocols related to COVID-19.
- IX. Vendor Communication:
 - a. Inform vendors that access to camp's facilities may be limited/restricted. This can be done through signs at the welcome center and on the kitchen doors.
 - b. Inform vendors that, during deliveries, they are required to take precautions:
 - i. Maintain physical distancing between themselves and campers/staff
 - ii. Where appropriate PPE (face mask)
 - iii. Do not make deliveries if they have symptoms associated with COVID-19
- X. Local Health Officials Communication:
 - a. Executive director must coordinate with local health officials (Ottawa County Health Department); they should provide input strategic collaboration in the decision-making response to the COVID-19 pandemic for Camp Geneva. This document to be reviewed with OCHD.
 - b. Work with OCHD or local health officials for any additional strategies appropriate for camp.
 - c. Inform the OCHD officials on the camp operations scheduled.
 - d. Regularly share camper absenteeism data with local health officials if requested.
 - e. The executive director should notify the local health officials of suspected and confirmed cases immediately.
 - f. Seek guidance from the local health officials about whether to dismiss or end camp early if necessary.

2.0 Health – Screening and Prevention

Before Camp

- Campers are encouraged to get tested to assure that they have had a negative diagnostic test for COVID-19 completed within the last 10 days.
- Before arriving, campers can find a testing location in their community by visiting [Michigan.gov/coronavirustest](https://www.michigan.gov/coronavirustest).
- If cost is a barrier, the state of Michigan also provides a list of locations that are providing testing at no cost.
- Campers should assure that they have been tested and the result was negative, but they should not be required to submit documentation of their test result.

- Testing does not eliminate the need to implement the prevention measures outlined in this document. Someone can still become infectious or become infected with COVID-19 after the testing, but this is one imperfect step taken to screen out someone with active infection prior to coming to camp.

Initial screening

1. Camper families to be given a drop off time slot. Drop offs happen in cabin groups at various locations on Shores and Pines. Each group will be well-marked and parking lot attendants will help parents get to where they need to go.
2. Health screening personal should wear a GENEVA provided face mask. Staff will ask screening questions to the parent.
3. Test camper temperature in the parking lot. Campers should be temp tested using noncontact thermometers and have a temperature below 100.4 F. Disinfect thermometer with alcohol between each use if a noncontact thermometer is unavailable and a temporal thermometer is used instead. The screening will happen at the parent's vehicle and parents/guardians will be asked:
 - a) Have you or your child been in contact with a person who has COVID-19?
 - b) Has your child felt unwell in the past 3 days or experienced symptoms (fever, cough, shortness of breath, body aches, change in taste or smell, change in appetite)?
4. Campers will be asked
 - a) Have you felt unwell in the last three days?
 - b) Are you feeling well today?
5. Any camper that does not pass the screening questions or who has a temp above 100.4 must return to their vehicle and is not permitted to join.
6. Campers who are cleared are then brought to their cabin, that will serve as their home base, by a camp staff member. A counselor will be there to greet them and offer instructions for finding a seat and placing belongings.
7. Only the camper will be permitted to leave the parking lot. Parents and family members will be asked to stay in the parking lot.

Ongoing screening

- Screening questions and temperature checks will occur at the beginning of each day with an infrared, non-touch thermometer.

Response to Potential Cases

- Campers and staff that are suspected to be positive for COVID-19 should put on a mask and be separated from the group. Staff should reference and follow guidelines in this document. If a camper complains of not feeling well or if a staff member observes concerning health behavior during the day, the camper will be brought to the health officer who will assess the camper.

- If quarantine is necessary, the camper may wait outside with the health officer or in an open cabin (as long as child protective policies are observed) until a parent/guardian can pick them up.
- If a staff member exhibits symptoms, another staff member will be assigned to that cabin to maintain required staff to camper ratios.

Summer Staff Screening

- It is recommended summer staff have a COVID-19 test within 5 days of arrival to camp or in their hometown ahead of camp.
- Upon arrival and every morning they will complete a short health screening form asking them if they have any symptoms and their temperature will be checked and documented each day.
- Counselor checks will be facilitated and documented by the Health Officer. The food service director will complete it for their team. Year-round staff will complete their own. All forms will be stored in the office confidentially.
- Any staff member employed by Camp Geneva reporting any symptoms must report to the health officer for further instructions.

3.0 Facilities Management

• General Recommendations

- Before camp begins, assemble a Building Readiness Team, to ensure all buildings are ready, with special attention to ventilation. This team consists of the maintenance director, assistance maintenance director, program director, office manager, and executive director.
- See [Guidance on Facilities Management](#) for specific details on actions to take throughout the summer.
- Maximizing air ventilation is key. -Using HVAC systems, open windows, and fans, continue to keep indoor air moving out and outdoor air moving in.

• Bathrooms

- Campers and staff will avoid sharing common bathroom supplies (towels, soap, toothpaste, etc.). Campers will be instructed to bring their own bathroom supplies and a container for toiletries to be stored in for the duration of camp
- Campers should keep personal items in their bag or tote and store their bag or tote in a designated area.
- Staff and campers will be encouraged to avoid placing toothbrushes or toiletries directly on counter surfaces.

- Practice Social (Physical) Distancing

Sleeping Accommodations

1. There will be at least six feet of space between beds and there will be head-to-toe orientation.
2. Sleepers will be positioned to maximize distance between heads/faces:
 - For bunk beds, head of the camper should be positioned in the top bunk opposite the position of the camper in the bottom bunk. Six feet separation is not required between the top and bottom bunk because of the physical barrier between campers.
 - For side-by-side beds, the head of the camper should be positioned in one bed opposite the position of the camper in the adjacent bunk.
 - For end-to-end beds, the toes of each camper should be positioned close to the other camper toes.
3. Sleeping accommodations should be cleaned and sanitized daily consistent with common space cleaning practice.
4. Campers should keep personal belongings organized and separate from other campers' belongings.

4.0 Food Service and other deliveries

Administration

- Planning and Preparation:
 - Our kitchen must have clean water, disposable gloves, facemasks for each employee and soap for proper cleaning/ disinfecting.
 - Staff must be trained on proper hand washing procedures and they should be posted by each handwashing station in the kitchen.
 - All staff cleaning the kitchen must have access to EPA approved disinfectants.
- Operations and Configuration:
 - Must include Kitchen staff on health screenings prior to starting work each day. (see the screening section of this guide).
 - For staff meals in the dining room, decrease table seating to a maximum of 6 individuals per table.
 - Best Practice would be to avoid buffet style, salad bars, self-service, table, counter food service or other configurations that require any shared utensils. "Grab and Go" services (boxed meals), in which meals are packaged or assembled on a tray are available for diners to retrieve.
 - If weather is conducive, meals will be consumed outdoors.

- Garbage can lids should be open in the kitchen and the dining room.
- Personal water bottles should not be refilled in the kitchen area. All diners should use camp-supplied glasses or cups and should receive a new cup for water if refill is desired.
- We should remove all condiment dispenser and offer individual condiments with each meals as needed.
- We should not have common beverage dispensers- (no milk or water pitchers). Provide bottles of beverage choices to be served with pre-packaged or pre-placed meals.

Food Service Workers

- Prior to Work:
 - Shower or bathe before work
 - Wash hands immediately upon arrival, then sterilize hands.
 - Complete screening with Head Cook
 - Follow all ServSafe guidelines.
- General:
 - Kitchen employees should not work if they are sick or showing any 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
 - Wash aprons after each meal.
 - Maintain physical distance and increased spacing between all kitchen staff whenever possible
 - Wash hands with soap and water for at least 20 seconds before and after breaks; using the bathroom, blowing nose, coughing, sneezing, touching frequently touches surfaces, and before preparing food.
 - Best practice should be for Kitchen Staff to use a fingernail brush during handwashing
 - Avoid touching eyes, nose, mouth.
- Food Preparation:
 - Use existing best practices for food preparation and storage. Coronavirus is not foodborne, but food service workers who are infected can transmit the virus to coworkers and diners.
 - Follow four key steps to food safety: (Clean, Separate, Cook, and Chill.)
 - Best practice would be to wear gloves and use clean utensils instead of the gloved hands when preparing the food.
- Cleaning and Disinfecting Food Contact Surfaces:

- Use soap and detergent and water to wash food contact surfaces then rinse after each use. Should also disinfect surfaces before any food preparation. Make sure the disinfectants used are EPA registered and are safe for food contact surfaces.
- Dishware should air dry; do not dry with towels.
- Head Cook and Site Director should ensure that the dishwasher machines are operating at appropriate specifications and appropriate detergents and sanitizers are being used.
- Cleaning and Disinfecting non-food contact surfaces:
 - See section 6.0
- No non-food service staff in the kitchen are permitted.

5.0 Guidance on Camp Store

- Allow camper access to the store on a schedule consistent with camper groups so that only campers of the same pre-defined group shop together.
- Store staff and campers will wear face covering when in the store.

6.0 Cleaning and Sanitizing

A cleaning crew will be available to clean and sanitize throughout the day and at the end of programming. The cleaning crew should know the schedule and be on top of the necessary cleaning and disinfecting duties.

- **Two-step clean and disinfect:** Recommendations are for a two-step process of cleaning and disinfecting. Cleaning is the use of soap and detergents to remove soil and other materials. Once cleaned items are disinfected. Prepare detergent and disinfectant sprays ahead of time for use.
- **Frequency:** Any time one group uses an area or items, these should be cleaned and disinfected before the next use. In all cases be sure enough time is allowed for disinfectant to be effective (i.e. 5 minute dry time for bleach solution)
 - Common Areas: Clean and disinfect areas between each groups use.
 - Items: Assign items to individuals where possible or disinfect clean and disinfect between each use
 - Frequent surfaces: Frequently touched surfaces (door knobs, light switches, drinking fountains, sinks, toilets, etc..) should be cleaned multiple times per day
 - Outdoor structures: most outdoor structures can be cleaned as usual
 - Bathrooms: clean and disinfect often, particularly between groups
- Nonporous surfaces
 - Wear proper PPE as described below
 - Clean surface of any dirt or other material on surface using a cleaning solution and wipe clean
 - Apply disinfectant to dry surface. Allow disinfectant to remain on surface for the appropriate time before wiping off of the surface.

- Porous surfaces
 - Launder any items as possible
 - If not able to launder, clean as good as possible and set aside for 3 days before reuse.
- PPE
 - Preparing solutions, cleaning and removing of trash should include proper PPE. This includes at least eye protection and disposable gloves. Use of aprons and gowns additionally is preferred.
 - Aprons should be disposable or washed after each use.
 - After removing gloves and other PPE, wash hands thoroughly.
- Probable or Confirmed Case
 - Wait up to 7 days before occupying and no disinfecting is necessary
 - Clean any area that was used by the sick person for more than 15 minutes
 - If indoors, wait up to 24 hours and ventilate before cleaning, if you can.
 - If outdoors clean immediately
 - Clean and disinfect area as prescribed above for nonporous surfaces. Use disposable cleaning and disinfecting products to avoid recontamination
 - Porous surfaces should be clean where possible, if they cannot be cleaned, label them to not be used for 3 days.
 - Enhanced PPE should be used for cleaning contaminated area including eye protection, disposable gloves, disposable facemasks, aprons/gowns.
 - Care in removing PPE should be taken to avoid contaminating the wearer
 - Wash hands immediately after removing gloves
- Shared equipment – Cleaned at minimum daily, but between uses is preferred.
- Laundry – facemasks, aprons used in cleaning should be laundered regularly. Any other garments that may have come in contact with a potential COVID positive Camper or staff should also be laundered for disinfection.
 - Gloves gowns and facemasks are recommended when doing laundry.
 - Don't shake laundry
 - Laundry should be collected in disposable bag or a container that will be disinfected after use
 - Wash using warmest water possible, add disinfectant (options include pinesol, Lysol laundry sanitizer, borax) according to instructions
 - Dry for at high temp for at least 45 minutes.
- Testing
 - Following CDC protocols and the use of EPA approved products when cleaning and disinfecting is a must.

7.0 Activities

- **General Guidance**
 - Campers and staff should wear cloth face coverings during indoor activities when maintaining physical distancing is not feasible due to area limitations.

- Activities will be held outdoors as much as possible
- When selecting activities, each cabin group will remain together and maintain physical distancing between cabin groups if another cabin group is using the same area
- For all activities, groups will remain small and maintain safe ratios. Until recommendations change, this will likely mean groups of 10 campers.
- Ensure campers and staff practice proper hand hygiene
 - Campers will be instructed to wash hands with soap and water for 20 seconds (sing “Happy Birthday”) before and after activities using program supplies shared with campers from other cabin groups. When hand washing isn’t readily available, then the counselor will have hand sanitizer available.
 - Counselors will have alcohol-based hand sanitizer to use before and after activities.
 - Handwashing/Sanitizing stations may need to be setup around the camp grounds.
- All shared items and equipment (bows and arrows, waterfront paddleboards, art supplies, etc) should be cleaned and disinfected between use. Refer to cleaning and disinfecting section of the guide for instructions on cleaning and disinfecting porous and non-porous objects
- Where we can, each participant will receive their own for the duration of their time at camp.
- Where we can, program supplies will rest for three days between use to prevent the spread of the virus.
- Campers will use personal, reusable water bottles that will be filled at their own cabin groups bathroom only. Staff should disinfect any used spigot regularly.
- **General Safety**
 - Efforts to maintain physical distancing should not impact existing camp safety protocols (first aid, CPR, no one by themselves within cabin groups)
 - Prepare for absence of crucial staff by developing a roster of qualified individuals who can fill in if staff members are sick or have to return home for other reasons.
 - If emergency care is needed and physical distancing cannot be maintained, then follow normal camp procedures and consider guidance for first responders and victims from CDC, National Safety Council, and American Red Cross
- **First Aid and CPR**
 - If CPR/first aid is required during an activity, it is best to follow normal camp protocol that considers current guidance from CDC, American Red Cross, and American Heart Association.
 - All staff will be trained on the camper operations and safety plan.

- **Outdoor Activities**

- Sports and Range Activities (Equipment)

- Provide campers with dedicated, individual equipment for the camp session, if feasible.
 - Limit shared high-touch equipment to campers of cabin groups, if feasible, for the duration of camp
 - All equipment (bows, paddles, sports balls, box hockey) should be cleaned and disinfected immediately after each use. Cleaning and disinfection at the end of each day should also be conducted on all sports and range equipment.

- **Waterfront**

- **Swimming**

- **Pool**

- As noted by the CDC, proper operation, maintenance, and disinfection of swimming pools will likely inactivate the virus that causes COVID-19.

- Swimming pools and play areas should be properly cleaned and disinfected, following the procedures outlined in the Cleaning and Disinfection section of this guide, in addition to the following practices:

- Maintain proper disinfectant levels (1–10 parts per million [ppm] free chlorine or 3–8 ppm bromine) and pH (7.2–8).
 - Treat pool with biocidal shock treatment on a daily to weekly basis.
 - Follow local regulations pertaining to operation and maintenance of pools.

- Other items to note in the pool context:

- Personal flotation devices should be cleaned and disinfected after each use, following the guidance in these guidelines. Do not use bleach products on ropes or lifejackets.
 - Campers should follow physical distancing per cabin groups and proper hand hygiene prior to entry and when leaving aquatic facilities
 - During swimming activities, the following practices are recommended:
 - Best practice: For swimming, continue safe swim practices. Swimmers must participate in first day swim test to maintain safety.
 - Best Practice: For Counselors, maintain the same instructors with each group of campers each day.

- Life jackets/PFD can be divided into three groups, used once by a camper and then isolated for three days.
- Climbing rope and tower should be cleaned after each cabin group use.

- **Indoor Activities**

- **Performing Arts (Skit clothes)**

- Consider designating certain equipment to individuals for the duration of camp to decrease the amount of shared items.
- We might need to acquire laundry bins of some kind to designate which costumes have been used and need to be laundered.
- Items will be used once, then laundered before re-use.
- Shared music equipment should be cleaned after each use

Item 8.0 was moved to the top of these Guidelines

9.0 Transportation Considerations

- **Pick up/Drop Off**

- Staggered procedures (alphabetical or similar) will be implemented to help with safe procedures.
- Guardians should say goodbye to their camper near their vehicle and may not leave the parking lot.
- The sign in and sign out will be done by the staff and witnessed by the driver as to not have to pass clipboards and pens
- If Pick up/Drop off people need to leave the vicinity of the vehicle, they must wear a face covering

- **Intake of Campers and staff**

- Campers will go through their daily health screening (see screening campers and staff section)
- Any belonging that campers bring to camp will be stored in their dedicated cubby or bunk area. Campers and counselors should do their best to avoid touching each other and each other's stuff.
- When they reach their cabin, they will put their belongings in their assigned space and go to the restroom to wash their hands with soap and water for at least 20 seconds

- **Travel by Bus to and from Camp (should we decide bussing is okay)**

- We do not intend to use the bus for campers

10.0 Personal Protective Equipment

PPE plan

- Use – Use the correct PPE in the correct situation. For the most people this will be cloth face masks and certain times. When interacting with someone with symptoms of COVID-19 who is believed to potentially be positive for COVID-19, then higher precautions should be taken with gloves, face shields, N95 respirators.
- For Campers:
 - Medical professionals recognize that many children will not reliably wear a cloth face covering and that required use may result in increased touching of the face which would negate the purpose. Campers may take the cloth face coverings off multiple times a day and in the process, it will possibly touch the floor and other objects making them a potential source of infection.
 - Each camper will be given a “seamless bandana” for when social distancing is not possible outside of their cabin group. For example, they will not be wearing “seamless bandanas” during physical activity or in the pool area. The face covering may be necessary in the event of inclement weather.
- For Staff:
 - Camp Geneva should establish (and consistently enforce) expectations for wearing cloth face coverings with staff members and families. Camp Geneva leadership should also provide frequent reminders that wearing a cloth face covering is not for the protection of the wearer but rather for those around them. Given the possibility of asymptomatic transmission occurring, nobody knows if and when they may be actively infected and able to infect those around them. Wearing a cloth face covering is one of the most important ways to reduce transmission occurring in this manner.
 - Cloth face coverings, such as a homemade mask, scarf, bandana, or handkerchiefs, are best. N95 masks and surgical masks are not recommended at this time for staff (other than camp health officers).
 - Staff will not wear face masks when with their cabin groups.
- Storage of PPE– face shields, N95’s, and some gloves should be stored in shores and pines nurses’ quarters. Some gloves should be kept in kitchen storage where they can be accessed by those using disinfecting materials when they are cleaning. Personal cloth face masks should be kept with a person for the day and stored with personal belongings.
- N95 respirators – Respirators are to be reserved for staff that are interacting with potential COVID-19 positive campers or staff or if they are cleaning the area where the suspected COVID-19 positive person was. The respirator may be reused if they remain clean and are not contacted by any fluids. Use of a face shield will help keep the respirator clean. The Respirator should be removed carefully and placed in labeled paper bag for storage until the next use. If the mask becomes soiled or cannot retain fit it should be discarded.

- Face masks – All staff should carry a face mask with them at all times during the day. Wash masks regularly. Face masks are required when:
 - Indoors with people.
 - When outside interacting and social distancing between clusters cannot be maintained.
 - Kitchen staff whenever working on food
 - Cleaning staff when cleaning and disinfecting
 - Any interaction with those outside of camp
 - Day staff or year-round staff should wear masks when inside or interacting with groups.
- Shields
 - The main face shields in nurses' quarters reserved as part of proper PPE for those interacting with anyone suspected to be COVID-19 positive.
- Gloves – Gloves are useful in a couple situations but care should be taken for their use. Kitchen staff will continue to use the gloves they regularly wear. The nitrile gloves will be reserved for specific situations. Gloves can offer a false sense of security and therefore care should be taken while using. Wash hands immediately before and after each use. Never touch your face while wearing gloves.
 - Screening and check in. Those taking temperature and screening campers should wear gloves.
 - Cleaning and disinfecting a room or equipment.
 - Signage on proper way to put on and take off gloves should be available with the gloves.

11.0 Supplies - RS

Purchase larger quantities of cleaners and disinfectants than usual. Ensure they are EPA approved

- Extra hand soap
- Extra cleaner, about twice as much
- Hand sanitizer and stations. Also providing small spray bottles for each group
- Extra paper towel
- Extra spray bottles for the different solutions and the many cleaning teams.
- Increased disinfectant – Lysol, bleach, ethanol (60% or higher)
- Laundry materials
- Aprons or gowns for cleaning crew

Medical supplies – Camps should have medical supplies for medical staff working with potential Covid-19 campers. The health officer will need to be equipped to assist those that may be isolated due to symptoms before heading home.

- N95 or KN95 respirators

- Disposable surgical mask
- Face shield
- Nitrile exam gloves
- Disposable gowns (or aprons for cleaning crew)
- Thermometers
- Medical waste bin