Effective Date: November 18, 2020

Statewide Reopening Guidance –Youth Programs

Authority: Executive Order No. 20-27, ORS 433.441, ORS 433.443, ORS 431A.010

Applicability: This guidance applies to:

- Youth Programs, including but not limited to enrichment programs.

Programs that serve children ages 12 and younger, including programs operated by a political subdivision of the state or governmental agency that would otherwise be exempt from licensure, must follow the Child Care and Early Education Guidelines. The exception is that youth programs that offer programming for middle school-age children may include children as young as age 11, and must adhere to the Statewide Reopening Guidance for Youth Programs.

Enforcement: To the extent this guidance requires compliance with certain provisions, it is enforceable as specified in Executive Order No. 20-27, paragraph 26.

Definitions: For purposes of this guidance, the following definitions apply:

- “Child care” means a licensed or Emergency Child Care program caring for children 6 weeks of age or older but under 13 years of age.
- “Close contact” means those persons with exposure within 6 feet or less for a cumulative of 15 mins over 24 hours with a confirmed case of COVID-19.
- “COVID-19 symptoms” means any or all of the following: fever and new cough (cough without a known, pre-existing non-COVID 19 cause such as allergies or asthma); shortness of breath or difficulty breathing; fever; chills; muscle pain; sore throat; new loss of taste or smell; nausea, headache, or diarrhea.
- “Day camp” means a camp facility that campers attend for an established period of time, leaving at the end of the program day.
- “Enrichment programs” mean programs that provide care for school-age children primarily for a single enrichment activity, for eight hours or less a week.
- “Youth programs” mean day camps, youth development activities and enrichment programs, or any enrolled gathering of children from primarily ages 13 to 18 for a defined period of daytime hours with teen or adult supervision. Youth programs can include children as young as age 11 provided they are part of a mixed-age cohort. Youth programs may not include any children under the age of 11.
Youth programs and enrichment programs play an important role in supporting Comprehensive Distance Learning for school-aged children (K-12) and are also important as a source of developmental support for youth and to meet the needs of many working parents.

**Operational Guidance**

**All Youth programs are required to:**

- Have a written communicable disease management plan. This plan must include:
  - Protocols to notify the Local Public Health Authority (LPHA) of any confirmed COVID-19 cases among youth or staff;
  - A process for keeping daily logs and record-keeping to assist an LPHA, as needed, with contact tracing;
  - A protocol for screening youth and staff for symptoms (See Section 1f of Ready Schools, Safe Learners);
  - A protocol that requires any ill or exposed person to stay out of the program; and possible cessation of program activities.

- Keep accurate daily logs for each stable group (“stable” means the same 10 or fewer youth in the group each day). These logs must be maintained for a minimum of 4 weeks after the end of the program and must include the following information to support contact tracing, if necessary:
  - Youth name
  - Drop off and pick up time for each youth
  - Name of adult completing both drop off and pick up (no signature required)
  - Adult emergency contact information for each youth
  - Names of all staff that interact with a stable group of children (including floater staff) during the day
  - Daily health checks of each child, noting if check was a pass or fail (do not note specific information)
  - If transportation is provided by the program, document names of all other riders and their contact information (if not recorded elsewhere).
  - Youth programs should refer to the Ready Schools, Safe Learners Guidance if providing transportation services.

- Maintain registration paperwork or other regular means by which programs collect information from youth that contains contact information for all youth and staff.

- Restrict from the program any youth or staff known to be a confirmed close contact of an individual with COVID-19 or who has been exposed (e.g., by a household member, friend or relative) to COVID-19 within the preceding 2 days.
  - Any youth or staff with a confirmed COVID-19 exposure within this timeframe should be quarantined and restricted from participation for a full 14 days from their last exposure.
• Communicate to staff not to report to work in person and communicate to parents not to bring their child to the program, if they or anyone in their household have recently had an illness with COVID-19 symptoms.
  ▪ A staff person or child with COVID-19 symptoms should stay home for at least 10 days after illness starts and until 24 hours after fever is gone, without use of fever reducing medicine, and COVID-19 symptoms are improving.
  ▪ Staff or youth who have a cough that is not a new onset cough (e.g. asthma, allergies, etc.), do not need to be excluded from the program. Programs may choose to collect information about existing conditions that cause coughing on intake forms.

• Report to and consult with the LPHA regarding cleaning and possible classroom or program closure, if anyone who has entered the program is diagnosed with COVID-19.

• Report to LPHA any illness consistent with COVID-19 among youth program staff or students who attended youth programs within the previous 14 days.

**General**

**All programs are required to:**

• Review and implement General Guidance for Employers.

• Provide hand sanitizer, handwashing facilities, tissues and garbage receptacles that are easily accessible to both youth and staff.

• Require all persons in the program to wash their hands often (e.g., after using the restroom, before and after meals, after coming inside, after sneezing, blowing the nose or coughing) with soap and water for at least 20 seconds.
  ▪ Alcohol-based hand-sanitizer (60 to 95%) may be used as an alternative to handwashing, except when eating, preparing or serving food and after using the restroom. If soap and water is not available (e.g. back country camp), alcohol-based hand sanitizer may be used; however, every effort should be made to facilitate soap and water handwashing.

• Remind staff and youth often to do the following:
  ▪ Cover coughs and sneezes with a tissue or elbow;
  ▪ Throw any used tissue away immediately into a garbage receptacle; and
  ▪ Clean hands after covering coughs and sneezes, and after throwing away used tissues.

• Minimize contact during drop-off and pick-up by:
  ▪ Requiring parents to remain outside of the building for sign-in and sign-out of their children.
  ▪ Requiring parents or caregivers to maintain physical distancing.
    ▪ Consider staggering drop-off and pick-up times.
    ▪ Limit use of commonly touched objects (writing implements, clip boards, etc.). or sanitize objects in between use.
Provide hand hygiene stations at the entrance of the facility—outside or immediately inside—so that children and staff can clean their hands as they enter.

**Face masks and face coverings:**

- Staff members/counselors must wear a mask, face shield or face covering in accordance with the [Statewide Mask, Face Covering, Face Shield Guidance](#).
- All program youth are required to wear a mask, face shield or face covering when participating in activities indoors. Program youth are required to wear a mask, face shield or face covering outdoors when six (6) feet of physical distance cannot be maintained.
  - Youth are not required to wear a mask, face shield or face covering when participating in an activity that makes wearing a mask, face shield or face covering not feasible, such as when swimming or playing a brass or woodwind instrument. However, additional steps should be taken, like increasing physical distancing (to greater than six (6) feet), more frequent cleaning, reducing the size of the cohort, or doing the activity outdoors, per Section 5f of the [Ready Schools, Safe Learners Guidance](#).
  - Programs should make an effort to provide a face covering to youth who do not have access to a face covering or forget to bring one.
- Youth of any age should **not** wear a mask, face shield or face covering:
  - If they have a medical condition that makes it hard for them to breathe;
  - If they have a disability that prevents them from wearing a mask, face shield or face covering;
  - If they are unable to remove the mask, face shield or face covering by themselves; or
  - While sleeping.
- Programs cannot restrict access to activities and instruction for children who cannot wear a mask, face covering or face shield. Staff and youth who have a medical condition that makes it hard to breathe or a disability that prevents the individual from wearing a mask, face covering or face shield can request an accommodation from the program to enable full and equal access to services, transportation and facilities open to the public. A reasonable modification does not include simply allowing a staff or youth access to activities or instruction without a mask, face covering or face shield.

**Screening for symptoms. What if someone is sick?**

**All programs are required to:**

- Check for new COVID-19 symptoms for anyone entering the program facility/area or working with youth and staff. Individuals with a fever greater than or equal to 100.4° F should not be allowed to enter. If parent cannot check a child’s temperature, it is recommended that the program check the temperature.
• Keep youth away from others immediately if a youth or staff member exhibits or develops a new cough (e.g., unrelated to pre-existing condition such as asthma), fever, shortness of breath, or other symptoms of COVID-19 during the day/class session and send them home as soon as possible.
  ▪ While waiting for a sick child to be picked up, a staff member must stay with the youth in an area away from others. The caregiver must wear a face covering and should remain as far away as safely possible from the youth (preferably at least six (6) feet), while remaining in the same room.
  ▪ The sick youth or staff must stay home for at least 14 days after illness starts and until 24 hours after fever is gone, without use of fever reducing medicine, and COVID-19 symptoms (fever, cough, shortness of breath, and diarrhea) are improving.

• Ensure that the program has flexible sick-leave and absentee policies that allow staff to stay home while sick or required to quarantine.

• Report to and work with the local public health authority about cleaning and possible need for closure, if anyone who has entered the program facility is diagnosed with COVID-19.

• Report to the local public health authority any cluster of illness among the program staff or youth.

**Physical Distancing**

All programs are required to:

• Be limited to stable groups of 10 or fewer youth (“stable” means the same 10 or fewer youth in the group each day).
  ▪ The stable group may change no more frequently than once per week (e.g. for programs operating on a weekly schedule).
  ▪ Programs hosting different morning and afternoon groups may be offered. Sanitation steps must be taken between these sessions.
  ▪ Before and after care must be carefully managed to keep youth in the same stable group in which they will spend their day.
  ▪ A program can have multiple stable groups of 10 if the facility or site can accommodate physical distancing for the number of youth hosted. Stable groups should remain at a ratio of 1 staff to 10 youth.
    ▪ A minimum of 35 square feet per child must be available for indoor spaces, with a maximum of 50 children;
    ▪ A minimum of 75 square feet per child must be available when multiple cohorts are in shared outdoor spaces, with a maximum of 100 children;
    ▪ Youths’ access to or use of meals, restrooms and activities happens within a stable group of 10.
  ▪ Youth programs are limited to 250 youth in a facility during the course of the program week.
- Stable groups consist of youth and staff; the number of staff needed for a group does not count toward the total of 10. Staff should remain with a single group as much as is possible. Staff who do interact with multiple stable groups must wash/sanitize their hands between interactions with different stable groups.

- **Before and after care:** Cohort groups are limited to no more than 10 youth at a given time in a cohort. Youth cannot be part of more than two cohorts (including transportation) in any given week.

- Any one staff member cannot interact with more than three cohorts in a given day and five in any given week.

- Ensure that each stable group remains in the same indoor physical space each day and does not mix with any other group, when indoors.

- Minimize the number of staff interacting with each group of youth; staff must be dedicated to a single group and not move between groups, if possible. If “floater staff” or different staff rotate with the stable group, they must wash or sanitize their hands prior to entering the space with the stable group of youth.

- No outside visitors may enter the program.

- Support physical distancing during daily activities and classes and maintain at least six (6) feet between individuals. For example, structure programming in the following ways:
  - Eliminate large group activities (larger than stable group).
  - Increase the distance between youth during table work.
  - Plan activities that do not require close physical contact among multiple youth.
  - Frequently clean and disinfect shared equipment. This includes, but is not limited to, equipment such as art supplies, musical instruments and mitts. Use disinfectants that are included on the Environmental Protection Agency (EPA) approved list for the SARS-CoV-2 virus that causes COVID-19.
  - Minimize time standing in lines and take steps to ensure that six (6) feet of distance between youth is maintained.
  - Ensure more physical distance between participants for activities that include brass or woodwind instruments because these instruments may spread respiratory droplets farther than six (6) feet.

**Intensify cleaning, disinfection and ventilation**

**All programs are required to:**

- Clean, sanitize and disinfect frequently touched surfaces (for example, private playground equipment, stationary climbing frames, door handles, sink handles, transport vehicles) multiple times per day.

- Avoid use of items (for example, soft or plush toys or pillows) that are not easily cleaned, sanitized or disinfected.
• Disinfect safely and correctly. Keep disinfectant products away from children following directions on the label, as specified by the manufacturer.

• Ensure that ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, and other methods.
  ▪ Do not open windows and doors if doing so poses a safety or health risk (for example, allowing pollen in or exacerbating asthma symptoms) to campers using the facility.

Field Trips/Transportation

Overnight field trips are not allowed at this time.

All programs are required to:

• Avoid travel with others outside their stable group.

• Document the names in each stable cohort(s) and staff including the driver, along with the date and time of the trip, and the vehicle number/license.

• Allow drivers to transport multiple stable groups. Drivers must wear a mask, face covering or face shield and sanitize hands before and after driving each stable group.
  ▪ Vehicles must be cleaned between each group of students and staff following transportation guidelines.

• Make sure youth and staff are seated in vehicles so that there is three (3) feet of distance between people.

Food service

All programs are required to:

• Observe all usual food handling and storage protocols.

• Ensure all youth and staff wash hands with soap and water prior to eating. In limited circumstances (e.g., back country camps) where use of soap and water is not possible because of lack of running water, using alcohol-based hand sanitizer (60-95%) is acceptable.

• Encourage youth to bring their own food, if possible. Youth must be told not to share food with other campers.

• Comply with the Statewide Freeze Guidance for Self-Service Operations.

• Drop in participation in Youth programs is prohibited. Child care provided by a gym, retail store, or similar for children of clients or customers also continues to be prohibited Programs held in public settings (e.g., parks) must follow the general guidelines as above and any other guidelines related to the location of the program. For example, programs in state parks must follow state park use guidance as well as Youth Program guidance.

• If programs have on-site pools they must also follow the Swimming Pools guidance.

• Lakes: Youth and staff swimming in lakes should keep 6-feet apart and follow all hand washing and other hygiene recommendations. Facilities for changing in
and out of swim gear must follow guidance for closest facility type (e.g. locker room, etc.).

- Programs must train staff prior to formal start of the program. If staff training is in person, physical distancing must be maintained. This includes training on COVID-19 facts, cleaning/sanitation and safety.

- Per ORS 419B.005, an “employee of a public or private organization providing child-related services or activities” is considered a mandatory reporter. During the COVID-19 crisis, child abuse reporting has gone down by more than 60%. Programs must include training to recognize and report suspected child abuse and neglect. Staff can report any suspected child abuse by calling 1-855-503-SAFE (7233). Additional resources can be found through the Early Learning Division and Oregon Department of Education.

- The nature of group gatherings raises risk for individuals with certain health conditions. These groups are at higher risk of poor outcomes with COVID-19. Youth and employees in higher risk groups are strongly recommended not to attend youth programs.
  - High risk is defined as:
    - People 65 years and older;
    - People with chronic lung disease or moderate to severe asthma;
    - People who have serious heart conditions;
    - People who are immunocompromised due to organ transplant
    - People with severe obesity (body mass index [BMI] of 40 or higher);
    - People with diabetes;
    - People with chronic kidney disease undergoing dialysis;
    - People with liver disease; and
    - Any other underlying conditions identified by the OHA or CDC.

Additional resources:
- Signs you can post
- Statewide Mask, Face Covering, Face Shield Guidance
- OHA General Guidance for Employers
- ODE’s Ready Schools, Safe Learners Guidance for Schools
- ELD’s Child Care and Early Education Guidelines

Document accessibility: For individuals with disabilities or individuals who speak a language other than English, OHA can provide information in alternate formats such as translations, large print, or braille. Contact the Health Information Center at 1-971-673-2411, 711 TTY or COVID19.LanguageAccess@dhsoha.state.or.us