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Summer and Youth Programs Public Health Recommendations

Applicability: This document provides recommendations for all youth programs, school-based programs, child care programs, and overnight camp programs. Operators are encouraged to comply with all the recommendations in this document, which represent best practices to support health and safety in youth programs during the COVID-19 pandemic.

NOTE: These recommendations are **in addition to** any applicable Oregon Administrative Rules (OAR). Programs **must comply** with all applicable OARs. Those rules are not specifically identified in this document and may include vaccination, exclusion or other disease management requirements.

At the bottom of this document, there are links to regularly-updated information for youth programs as well as links to additional resources.

Definitions: For purposes of these recommendations, the following definitions apply:

- “Clean” or “Cleaning” means the use of soap or detergents and water on surfaces to reduce or remove germs from surfaces.
- “Child care” means a licensed, recorded, and license-exempt or program caring for children 6 weeks of age or older but under 13 years of age, including those operated by political subdivisions or governmental agencies.
- “Close contact” means those persons who were within six (6) feet of a confirmed case of COVID-19 for a cumulative 15 minutes over a 24-hour period.
- “Cohort” means a stable group of people who stay together consistently, with minimal interaction with other groups.
- “COVID-19 symptoms” means any or all of the following:
 - Primary symptoms: fever (temperature of 100.4°F or higher) or chills, shortness of breath or difficulty breathing, new cough, and new loss of taste or smell

- Non-primary symptoms: fatigue, muscle or body aches, headache, sore throat, diarrhea, nausea, vomiting, new nasal congestion, and runny nose.
- “Day camp” means a defined setting or facility that youth (K–12) attend for an established period of time, leaving at the end of the program day, which may or may not be licensed under [ORS Chapter 446](#).
- “Disinfect” or “Disinfecting” means the use of disinfectants following cleaning to kill germs that may remain on surfaces after cleaning.
- “Enrichment programs” mean programs that provide care for school-age children (K–12), primarily for a single enrichment activity for eight hours or less a week.
- “Household cohort” is a stable group of campers and staff who stay overnight together in a cabin, bunkhouse, tent, or similar defined space.
- “Outdoor” means any open-air space including any space which may have a temporary or fixed cover (e.g., awning or roof) and at least fifty percent of the square footage of its sides open for airflow such that open sides are not adjacent to each other.
- “Overnight camp” means a youth program with youth staying overnight at accommodations on site, which may or may not be licensed under [ORS Chapter 446](#).
- “Sanitize” or “Sanitizing” means the cleaning required by applicable local and state food sanitation requirements.
- “Susceptible” has the meaning given that term in OAR 333-019-0010.
- “Youth programs” means:
 - Day camps;
 - Summer camps;
 - Overnight camps;
 - Enrichment programs serving children 0 to 18 years of age.
 - Programs operated by political subdivisions or governmental entities that offer programming only for middle school-age children ages 11 years and older;
 - Any enrolled gathering of children from primarily ages 13 to 18 years for a defined period of daytime hours with teen or adult supervision. These gatherings can include children as young as age 11, provided they are part of a mixed-age cohort.

General Prevention Strategies

- Recommend youth and staff members, regardless of vaccination status, stay home if they exhibit primary COVID-19 symptoms and seek testing.

- If the youth or staff member has a negative COVID-19 test, they may return to the program once fever-free for 24 hours and symptoms are improving
- If the youth or staff member has not been tested,
 - » If they have only one primary COVID-19 symptom (new cough, fever/chills, shortness of breath/difficulty breathing, or new loss of taste or smell), OHA recommends waiting until the youth or staff is fever free for 24 hours and symptoms are improving before returning to the program.
 - » If the youth or staff member has at least two primary COVID-19 symptoms, they should stay home for 5 days and until they are fever free for 24 hours and symptoms are improving.
- Implement for all staff and youth layers of prevention strategies to increase protection for those who are not vaccinated, and higher risk for [severe COVID-19](#), and slow the spread of the virus that causes COVID-19. Prevention strategies include:
 - Promoting [vaccination and booster](#) doses for eligible staff, youth and their family members
 - Recommending universal wearing of [face masks or face coverings](#) when [COVID-19 community level](#) is high.
 - Recommending individuals who are at high risk of severe illness or are unvaccinated wear face masks or coverings when [COVID-19 community level](#) is medium
 - [Handwashing, covering coughs and sneezes](#)
 - [Physical distancing and cohorting](#)
 - Maintaining a healthy environment
 - » Increasing or improving [ventilation](#) where possible (see below for more information)
 - » Limiting shared objects
 - » Routine [cleaning](#)

Screening for symptoms and testing

Note: see *Screening and testing for overnight camps* section below for additional recommendations

- Strongly encourage parents or caregivers to monitor their children daily at home for signs of infectious illnesses, including COVID-19, and keep youth with signs or symptoms of infectious illness home when sick and/or seek medical care.

- Direct and routinely remind staff members to self-screen for signs or symptoms of infectious illness, including COVID-19, daily.
- Separate a youth or staff member from others if they exhibit or develop a new cough, fever, shortness of breath, or loss of taste or smell (primary symptoms of COVID-19) during the day/class session and send them home as soon as possible.
 - While waiting for a sick youth to be picked up, a staff member should stay with the youth in an area away from others. The caregiver should 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 or outdoor area.
- Consider flexible sick-leave and absentee policies that allow staff to stay home while sick.
- Contact the LPHA with questions about cleaning and additional infection control measures if there has been a case of COVID-19 at the program.

Vaccination and booster doses

- Promote COVID-19 vaccination and booster doses for all eligible staffers, youth and family members. People who are up to date with vaccinations are less likely to develop severe COVID-19 infection and transmit COVID-19 to others.

Hand hygiene

- 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 frequently wash their hands with soap and water for at least 20 seconds (e.g., after using the restroom, before and after meals, after coming inside, after sneezing, blowing the nose or coughing).
 - Hand sanitizer containing at least 60% alcohol may be used as an alternative to handwashing, except before and after eating, preparing or serving food and after using the restroom. If soap and water is not available (e.g., backcountry camp), alcohol-based hand sanitizer may be used; however, every effort should be made to facilitate soap and water handwashing.
- Ensure all youth and staff wash hands with soap and water prior to eating. In limited circumstances (e.g., backcountry camps) where use of soap and water is not possible because of lack of running water, use hand sanitizer containing at least 60% alcohol.
- Remind staff and youth often to:

- » Cover coughs and sneezes, even when wearing a mask, 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.

Ventilation

- Ensure that ventilation systems (e.g., HVAC) operate properly. Increase circulation of outdoor air as much as possible by opening windows and doors, using fresh (non-recirculated) air settings on ventilation systems, using fans and employing other methods. See [OHA Indoor air considerations for COVID-19 for smaller spaces](#) and [CDC ventilation recommendations](#).
 - Do not open windows and doors if doing so poses a safety or health risk to people using the facility (for example, allowing pollen or smoke in, which may be unhealthful for people with asthma or breathing problems).

Face masks and face coverings

- Support youth and staff who prefer to wear masks
- Recommend all staff and youth (2 years old and older) wear masks indoors when the level of community COVID is high. When the level of community COVID is medium, those who are unvaccinated or at higher risk for severe COVID-19 should consider wearing a mask. Some programs may choose to continue universal masking at lower community levels because it promotes an inclusive and supportive environment for those youth and staff who are at higher risk for severe COVID-19.
- Review and implement the Oregon Health Authority's [Public Health Recommendations: Wearing Masks, Face Coverings and Face Shields and Physically Distancing](#).
- When youth or staff wear a face covering, the face covering should be washed daily or a new one worn daily. If a face shield is used, it should be wiped down with disinfectant at the end of the day after use. Disposable face coverings or face shields should be worn only once.
 - See CDC guidance on [How to Store and Wash Masks](#) and [remove masks correctly](#).

Physical distancing and cohorting

**Note: Although stable group restrictions have been lifted, keeping youth in the same group helps to limit the number of individuals exposed if someone with COVID-19 is identified as attending a youth program. For additional information, including best practice*

recommendations, please refer to the [CDC guidance for cohorting and physical distancing for camps](#).

- Direct staff and youth from different groups to practice physical distancing.
- Minimize interaction with individuals from other groups.
- Maximize outdoor activities, including contracted services and group activities.

Cleaning and disinfection

- Frequently clean high-touch surfaces (for example, shared equipment, stationary climbing frames, door handles, drinking fountains and transport vehicles).
 - Ensure high-touch surfaces and items are cleaned between uses by different cohorts
- Clean restrooms daily, prioritizing high-touch surfaces like stall handles, doorknobs, sink handles, and faucets.
- Disinfecting surfaces after cleaning is recommended if [certain conditions apply](#), such as the space having been occupied by an individual with COVID-19. Use disinfectants that are included on the [Environmental Protection Agency \(EPA\) approved list](#) for the SARS-CoV-2 virus that causes COVID-19.
 - Establishment operators may consider following the disinfection practices recommended by the [Pediatric Environmental Health Safety Units](#).
- Routinely clean outdoor play structures (disinfection is not needed). Shared equipment should be cleaned and/or disinfected in accordance with [CDC guidance](#).
- Avoid use of items (for example, soft or plush toys or pillows) that are not easily cleaned.

Overnight camps

- Encourage eligible staff, campers, volunteers and family members to get fully vaccinated for COVID-19.
- Ensure users are from the same household cohort.
- Minimize the number of campers in each tent.
- Maximize ventilation by opening vents or screens, as feasible.
- Create household cohorts for those campers and staff who share cabins, bunkhouses, tents, etc.
- Remind those who leave camp to follow all state and local COVID-19 mitigation guidelines to minimize their risk of exposure.

Testing for overnight camps

- Opt-in to [COVID-19 Testing in Oregon's K–12 Schools diagnostic testing program](#). This program offers free BinaxNOW point-of-care testing resources and is appropriate for staff or campers who develop symptoms while at camp.
- Have an identified isolation room or area to separate anyone who exhibits COVID-like [symptoms](#). If the camp has a healthcare provider, they should be provided and wear appropriate personal protective equipment, including N95 respirators, and use [Standard and Transmission-Based Precautions](#) when caring for symptomatic people. See: [What Healthcare Personnel Should Know About Caring for Patients with Confirmed or Possible COVID-19 Infection](#).

Regularly-updated general COVID-19 information and information about COVID-19 vaccines and testing:

- [COVID-19 Testing in Oregon](#)
- [Oregon COVID-19 Youth Testing Programs](#)
- [K-12 and Camp Summer COVID-19 Testing Resources](#)
- [Mask Recommendations and Requirements](#)
- [COVID-19 Vaccine Information](#)

Additional resources:

- [ELD's Child Care and Early Education Resources](#)
- [CDC FAQ for Directors of Overnight Camps](#)
- [American Camp Association's Field Guide for Implementation of CDC Guidelines](#)
- [Association of Camp Nurses – Communicable Disease Management Template](#)
- [Food Sanitation Rules - Tools for Operators](#)
- [CDC Guidance: Cleaning and Disinfecting Your Facility](#)
- [ODE's Ready Schools, Safe Learners webpage](#)
- [Oregon Administrative Rules, Investigation and Control of Diseases](#)

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 COVID-19 Communications Unit at 1-971-673-2411, 711 TTY or COVID19.LanguageAccess@dhsosha.state.or.us