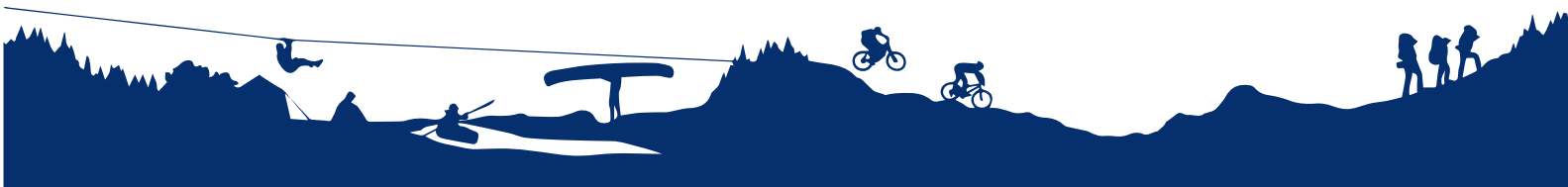


RESTARTING SCOUTING GUIDANCE DOCUMENTS

[ALL SCOUTING FAMILIES AND LEADERS ARE ADVISED TO READ]



BOY SCOUTS
OF AMERICA
CALIFORNIA INLAND EMPIRE COUNCIL





Restart Scouting Checklist

As always, the safety of our Scouts, volunteers, employees and communities is our top priority. This checklist outlines several minimum guiding protocols that adult leaders/volunteers must consider while working with local and state health departments, local councils, chartered organizations and Scouting families on when and how to resume meetings, service projects, camping and all other official Scouting activities.

If it is not practical to meet these minimal protocols, do not restart in-person activities.

S = SUPERVISION

- Understand local and state guidance on preventing COVID-19 exposure.
- Engage your chartered organization and local council on necessary adjustments.
- Conduct the “before you gather” protocols.

A = ASSESSMENT

- Identify participants who fall under the CDC’s group of higher-risk individuals. Notify all participants about the risks of participating since COVID-19 exposure cannot be eliminated.
- Verify that the planned activity, gathering or group sizes are not prohibited by local or state orders.

F = FITNESS AND SKILL

- Review Annual Health and Medical Records and consider using a [pre-event screening](#) for all participants.

E = EQUIPMENT AND ENVIRONMENT

- Verify that handwashing, hygiene and cleaning supplies are available and used properly.
- Monitor social distancing, interactions and sharing of equipment and food among participants.
- Monitor participants for changing health conditions.
- Use the “as you gather” protocols.

SAFE ≠ RISK-FREE

As the response to the pandemic shifts to a state-focused, phased approach, the Boy Scouts of America advises local councils to consult with their local and state health departments, as well as local chartered partners, to implement appropriate protocols to help keep our members, volunteers and employees safe.

Precautions and mitigation strategies are important, but they cannot eliminate the potential for exposure to COVID-19 or any other illness when in-person activities resume.

People with COVID-19 may show no signs or symptoms of illness, but they can spread the virus. Some people may be contagious before their symptoms occur. The fact is that someone with COVID-19 may pass the required health screenings and be allowed into program activities.

The Centers for Disease Control and Prevention (CDC) states that older adults and people of any age who have serious underlying medical conditions are at higher risk for severe illness from COVID-19. If you are in this group, please ensure you have approval from your health care provider prior to resuming in-person Scouting activities.

Every member, volunteer and family must evaluate their unique circumstances and make an informed decision before attending in-person activities.

We hope this information will be helpful as you make that choice.

For updates, please monitor <https://www.scouting.org/coronavirus>

BEFORE YOU GATHER:

- Consult** your council and chartered organization to understand community standards and protocols in place.
- Communicate** to all parents and youth that the Boy Scouts of America recommends that no one in the higher-risk category take part in person. Continue to engage virtually.
- Communicate** that anyone who feels sick must [stay](#) home. If you become sick or develop symptoms, isolate yourself then go home and seek care.
- Educate and train** all participants on appropriate social distancing, [cleaning and disinfecting](#), [hand hygiene](#) and [respiratory \(cough or sneeze\) etiquette](#) before meeting for the first time. Periodically reinforce the behaviors as needed.
- Before attending**, upon arrival and at least daily for longer events, all participants [should be screened](#) for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or having a temperature greater than or equal to 100.4 degrees Fahrenheit
 - Known close contact with a person who is lab-confirmed to have COVID-19
- As appropriate**, participants should have [face coverings](#) available to wear when gathering or when in public areas or venues. Several coverings per person may be needed.
- Communicate** that those who take part in person should avoid contact with higher-risk individuals for 14 days after the event.

AS YOU GATHER:

- Minimize group sizes.** Small groups of participants who stay together all day every day, remain [6 feet apart](#) and do not share objects are at the lowest risk. Think of a den or patrol that does not mix or gather with other dens or patrols, with supervision that stays with the small group. **Scouting's [Barriers to Abuse](#) always apply.**
- Stay local** to your geographic area and groups for unit activities. If you must travel, limit mixing with others along the way.
- Minimize mixing** with parents or siblings unless they are part of the unit activity. For example, the same parent picks up and drops off youth, and stays in the car. No guests or visitors who have not been through the pre-gathering protocols and screening should take part.
- Have hand sanitizer**, disinfecting wipes, soap and water, or similar disinfectant readily available for use at meetings, activities and campouts.
- Minimize the use** of common areas and shared tools. If unavoidable, they should be thoroughly cleaned and disinfected between uses.
- Develop dining protocols** (including but not limited to):
 - No self-serve buffet meals or common water coolers.
 - Use of disposable utensils, napkins, cups and plates.
 - Clean and disinfect eating and cooking gear after each use.
- Develop tenting protocols** for the group:
 - Minimize use of fans or devices that stir the air.
 - Campers should sleep head-to-toe in bunks or cots spaced as far apart as possible.
 - Individual tents, hammocks and bivys may be considered.
- During program activities:**
 - Equipment that must be shared should be disinfected before and after each use.
 - Where possible, assign activity-related protective equipment for the duration of an event to a single individual (life jacket, gloves, harness).
 - Effective handwashing before and after each program area use.
- In case of an injury or illness**, promptly report the incident, including COVID-19 exposures. Utilize [Incident Reporting Resources](#), including COVID-19 instructions.

When you get home:

- Avoid contact** with higher-risk individuals for 14 days.
- Monitor** for any signs of illness for 14 days, and
- Communicate** with your unit leadership should you develop symptoms.

MODEL PRE-EVENT MEDICAL SCREENING CHECKLIST

Use this checklist to assist in identifying potentially communicable diseases before event participation.

The intent of this checklist is to review with each youth and adult participant their current health status, both before departure and upon arrival at the event. Anyone entering a camp or event — including visitors, vendors, etc. — should be screened using this checklist.

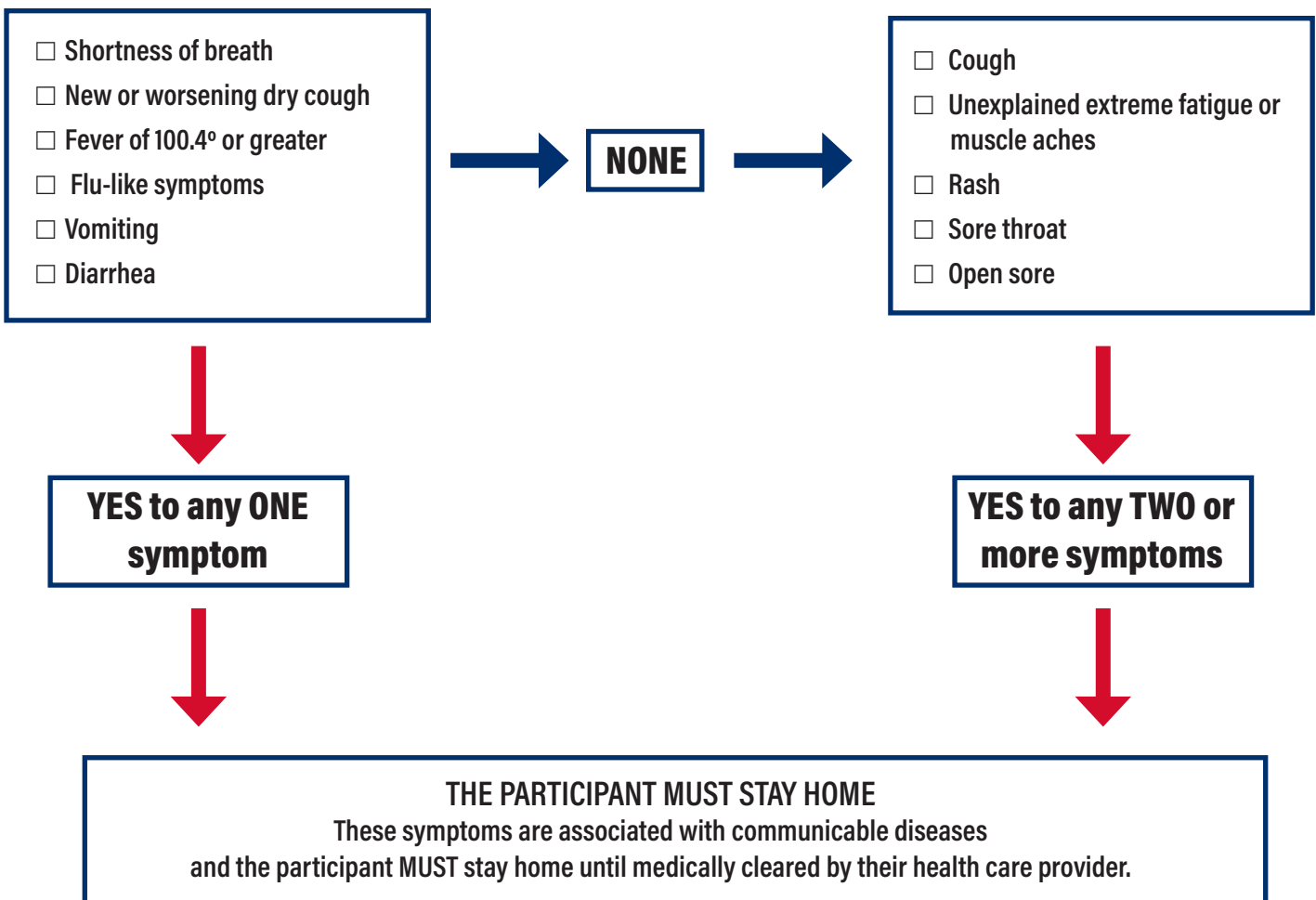
Councils should customize with input from their council health supervisor and local health department.

- Yes No Have you been in contact with anyone who has COVID-19 or is otherwise sick?
- Yes No Have you or anyone you have been in close contact with traveled on a cruise ship, internationally, or to an area with a known communicable disease outbreak in the last 14 days?

If the answer is “yes” to either of these questions, the participant must stay home.

- Yes No Are you in a higher-risk category as defined by the CDC guidelines?
If the answer is “yes” to this question, we recommend that you stay home. Should you choose to participate, you must have approval from your healthcare provider and then proceed to the symptom decision tree below.

If the above answers are “no,” proceed to this symptom decision tree.



PRE-EVENT MEDICAL SCREENING CHECKLIST

This is a tool to assist leaders in identifying potentially communicable diseases in advance of event participation. The intent of this checklist is to review with each participant their current health status both before departure and upon arrival at the event.

Has the participant had any of the following symptoms in the last 24 hours?

- Fever (100.4 F or greater)
- Vomiting
- Diarrhea

If the participant has fever, vomiting, OR diarrhea—**he or she should stay home.**

Has the participant had any of the following symptoms in the last 24 hours?

- Unexplained extreme fatigue or muscle aches
- Rash
- Cough
- Sore throat
- Open sore

If the participant has any two (or more) of these symptoms—**he or she should stay home.** If the participant has one of these symptoms, discuss any limitations and restrictions and consider having him or her stay home.

Participants who become ill should not return to the activity until they are cleared by a health-care provider.

PREVENTION OF COMMUNICABLE DISEASES IN SCOUTING: RECOMMENDATIONS FOR UNIT AND COUNCIL EVENT LEADERS

Introduction

Communicable diseases, both acute and chronic, exist everywhere. An awareness of the medical approach to these problems will help Scouting leaders plan and conduct safer events.

Common Ways Communicable Diseases Are Spread

Communicable diseases are infections that can spread from one person to another by direct contact, by contact with blood or bodily fluids (e.g., saliva, feces), airborne droplets from coughing or sneezing, or a “vector” like a mosquito or a tick.

Examples of Common Communicable Diseases

There are many communicable diseases. The table below has examples of these and shows that some diseases may be spread in multiple ways.

Direct Contact	Airborne Droplets (Respiratory Spread)	Fecal/Oral	Blood, Mucous Membrane Contact	Vector Spread (Mosquito, Tick)
Influenza	Influenza	Hepatitis A	Hepatitis B	Lyme disease
Common cold	Common cold	Norovirus	Hepatitis C	Rocky Mountain spotted fever
Hepatitis B	Whooping cough (pertussis)	Giardia	HIV	Ehrlichiosis
Conjunctivitis (pink eye)	Diphtheria	Pinworms	Zika virus	Zika virus
Chicken pox	Tuberculosis	Salmonella		West Nile virus
Lice	Measles	Polio		
Cold sore	Mumps	Food poisoning		
Ringworm				
Strep throat	Strep throat			
Impetigo				

Not all infectious illnesses are communicable. An ear infection is one such example.

Symptoms

Common signs and symptoms that may indicate a participant has a potentially infectious and communicable illness are fever, cough, sore throat, vomiting, diarrhea, sores with pus on them, pink eye (conjunctivitis), myalgia (muscle soreness), and fatigue.

PREVENTION: THE KEY TO SUCCESSFUL CONTROL OF INFECTIOUS DISEASES

PRE-CAMP MEDICAL QUESTIONNAIRE: Scouting occurs in groups and often in remote areas. Neither setting is appropriate for a person with a potentially communicable disease. Use of a pre-camp/pre-event medical questionnaire by all unit leaders is strongly recommended before any participant leaves the unit's home base. An example would be the BSA Pre-Event Medical Screening Checklist, No. 680-102. Riding in a car or bus with an individual who has certain infections (for example, norovirus) may be risky. If a participant is immunocompromised or has not received all of the recommended vaccines, it is recommended that they stay away from anyone who is ill.

IMMUNIZATION: The most effective method of preventing many infectious and life-threatening childhood diseases is, unquestionably, immunization. Many states and the American Academy of Pediatrics recommend mandatory immunization prior to enrollment in school. Immunization is effective in treating many, though not all, serious infectious diseases. Examples of diseases prevented by immunization are chicken pox, measles, mumps, and influenza. Tetanus immunization is required for all participants. Prescreening is suggested for potential infectious symptoms. Note that there may be additional state or local laws which supersede any Boy Scouts of America requirement. Check beforehand with the camp or event you are planning to attend or with the local Council Health Supervisor.

HAND-WASHING: Careful hand-washing prevents many infections. Hands may be washed with an alcohol-based solution containing at least 60 percent alcohol if the solution stays on the skin for about 20 seconds. If the hands are visibly dirty, soap and clean water should be used for at least 20 seconds until the dirt is gone from the hands and from under the fingernails. When handling or preparing food, hands should be washed frequently. Hands should always be washed after using the restroom—even in a wilderness setting where there is no “restroom.”

COUGHING: When anyone coughs or sneezes, it should be “caught” in the bend of the arm or in a tissue. Always wash your hands after coughing or sneezing into a tissue. It is also essential to disinfect surfaces after someone has coughed or sneezed over them because droplets of infected material may contain viruses or bacteria that remain alive for many minutes or even hours.

DISINFECTION: Disinfection of contaminated areas is a critical part of disease prevention. While there are many commercially available products for disinfecting surfaces, one effective method is to use at least 5.25 percent hypochlorite (bleach-based household cleaner) and water. For most surfaces, 1½ teaspoons of bleach per gallon of water is adequate. However, if a surface is contaminated with blood or feces, use ¼ cup of bleach-based cleaner in a gallon of water to wipe down the surface.

GLOVING: Nonlatex disposable gloves should be used when touching blood, stool, vomit, or bodily secretions from another person. Hand-washing is essential after removing the gloves. Several pairs of these lightweight gloves should be carried in all first-aid kits.

INSECT REPELLENTS: While many repellents are available, those with at least 10 percent and no more than 30 percent DEET are considered the best defense against biting insects by the American Academy of Pediatrics. Apply and reapply these repellents according to the directions on the container. Treating clothing with permethrin may also reduce insect bites.

QUARANTINE: Participants with any of the symptoms found in the Pre-Event Medical Screening Checklist should not participate in a Scouting event. A previously asymptomatic participant who develops symptoms during an event should be sent to a healthcare worker for evaluation if possible. If a communicable disease is thought to be present and a professional evaluation is not possible, the participant should be isolated from the rest of the group until he or she can be removed from the event and sent home.

INCIDENT REPORTING: If a participant requires medical care beyond Scout-rendered first aid, an incident report must be completed to notify the council. This is extremely important. The incident reporting tool and additional information can be found at www.scouting.org/health-and-safety/incident-report/.

WHEN TO NOTIFY THE COUNCIL HEALTH SUPERVISOR: An outbreak of a communicable disease has occurred when the number of cases is beyond the usual rate of occurrence for that particular disease. Many communicable diseases require notifying the local or state public health department. A unit leader should notify the council health supervisor if

- Multiple cases of an infectious illness occur, leading to an increased risk of others getting the disease
- The infection results in a participant being hospitalized

Requirements for reporting to public health officials vary by state. Contact the Council Health Supervisor and camp director if a suspected or known communicable disease occurs at a Scouting event.

OBSERVATION SUGGESTIONS: When is it safe to return to “play” if a communicable disease is diagnosed or suspected? The following are some general guidelines to reduce the incidence of spreading communicable diseases. If there is any uncertainty about whether a participant is infectious or a disease is communicable, a physician should be consulted.

- Isolation from the rest of the group is recommended until the ill participant can be evaluated or observed long enough to assure that he or she does not need to be sent home.
- A participant with fever (100.4 F or higher) should not participate in group events until he or she is without fever for at least 24 hours without the use of medicines (e.g., acetaminophen, ibuprofen, etc.).
- A participant with diarrhea should not participate until the diarrhea has subsided for at least 24 hours.
- A participant with pink eye (conjunctivitis), cough, or sore throat should be evaluated and should not return to the event until symptoms have resolved.

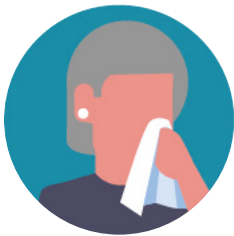
REFERENCES

- BSA Pre-Event Medical Screening Checklist: www.scouting.org/filestore/HealthSafety/pdf/680-102_PreEventChklist.pdf
- Boy Scouts of America—Incident Reporting Tool: www.scouting.org/health-and-safety/incident-report/
- Scouts BSA Handbook for Boys/Scouts BSA Handbook for Girls—Personal First-Aid Kit, p. 108
- American Academy of Pediatrics, healthychildren.org—Choosing an Insect Repellent for Your Child: www.healthychildren.org/English/safety-prevention/at-play/Pages/Insect-Repellents.aspx
- American Academy of Pediatrics, healthychildren.org—Immunizations: www.healthychildren.org/English/safety-prevention/immunizations/Pages/default.aspx
- Mayo Clinic Patient Care & Health Information—Infectious Diseases: www.mayoclinic.org/diseases-conditions/infectious-diseases/home/ovc-20168649
- North Carolina Child Care Health and Safety Resource Center—Cleaning and Sanitizing: What's the difference and how are they done? https://ncchildcare.ncdhhs.gov/Portals/0/documents/pdf/B/bleach_solution_fact_sheet.pdf
- World Health Organization—Glove Use Information Leaflet: www.who.int/gpsc/5may/Glove_Use_Information_Leaflet.pdf
- Centers for Disease Control and Prevention—Recommended Immunization Schedule for Children and Adolescents: www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-child-combined-schedule.pdf
- Centers for Disease Control and Prevention—When & How to Wash Your Hands: www.cdc.gov/handwashing/when-how-handwashing.html
- Centers for Disease Control and Prevention—Coughing & Sneezing: www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html

HOW TO PROTECT YOURSELF AND OTHERS

Print Resources Web Page: <https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html>

Know how it spreads



- There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19).
- **The best way to prevent illness is to avoid being exposed to this virus.**
- The virus is thought to spread mainly from person-to-person.
 - Between people who are in close contact with one another (within about 6 feet).
 - Through respiratory droplets produced when an infected person coughs, sneezes or talks.
 - These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
 - Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

Everyone should

Clean your hands often



- **Wash your hands** often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- If soap and water are not readily available, **use a hand sanitizer that contains at least 60% alcohol.** Cover all surfaces of your hands and rub them together until they feel dry.
- **Avoid touching your eyes, nose, and mouth** with unwashed hands.

Avoid close contact



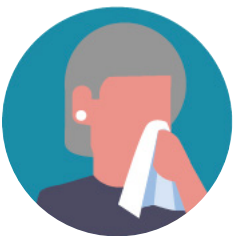
- **Avoid close contact** with people who are sick.
- **Stay at home as much as possible.**
- **Put distance between yourself and other people.**
 - Remember that some people without symptoms may be able to spread virus.
 - This is especially important for **people who are at higher risk of getting very sick.** www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html

Cover your mouth and nose with a cloth face cover when around others



- **You could spread COVID-19 to others** even if you do not feel sick.
- **Everyone should wear a cloth face cover when they have to go out in public**, for example to the grocery store or to pick up other necessities.
 - Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- **The cloth face cover is meant to protect other people** in case you are infected.
- Do **NOT** use a facemask meant for a healthcare worker.
- Continue to **keep about 6 feet between yourself and others.** The cloth face cover is not a substitute for social distancing.

Cover coughs and sneezes



- **If you are in a private setting and do not have on your cloth face covering, remember to always cover your mouth and nose** with a tissue when you cough or sneeze or use the inside of your elbow.
- **Throw used tissues** in the trash.
- Immediately **wash your hands** with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.

Clean and disinfect



- **Clean AND disinfect frequently touched surfaces** daily. This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks. www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html
- **If surfaces are dirty, clean them:** Use detergent or soap and water prior to disinfection.

SOCIAL DISTANCING

Keep Your Distance to Slow the Spread

Limiting face-to-face contact with others is the best way to reduce the spread of coronavirus disease 2019 (COVID-19).

What is social distancing?

Social distancing, also called “physical distancing,” means keeping space between yourself and other people outside of your home. To practice social or physical distancing:

- Stay at least 6 feet (about 2 arms’ length) from other people
- Do not gather in groups
- Stay out of crowded places and avoid mass gatherings

In addition to everyday steps to prevent COVID-19, keeping space between you and others is one of the best tools we have to avoid being exposed to this virus and slowing its spread locally and across the country and world.

Limit close contact with others outside your household in indoor and outdoor spaces. Since people can spread the virus before they know they are sick, it is important to stay away from others when possible, even if you—or they—have no symptoms. Social distancing is especially important for people who are at higher risk for severe illness from COVID-19.

Many people have personal circumstances or situations that present challenges with practicing social distancing to prevent the spread of COVID-19. Please see the following guidance for additional recommendations and considerations for:

- [Households Living in Close Quarters: How to Protect Those Who Are Most Vulnerable](#)
- [Living in Shared Housing](#)
- [People with Disabilities](#)
- [People Experiencing Homelessness](#)



If you have been exposed or are sick

- [Separate from others to limit the spread of COVID-19](#)
- [Take care of yourself while you're sick](#)

Why practice social distancing?

COVID-19 spreads mainly among people who are in close contact (within about 6 feet) for a prolonged period. Spread happens when an infected person coughs, sneezes, or talks, and droplets from their mouth or nose are launched into the air and land in the mouths or noses of people nearby. The droplets can also be inhaled into the lungs. Recent studies indicate that people who are infected but do not have symptoms likely also play a role in the spread of COVID-19.

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or eyes. However, this is not thought to be the main way the virus spreads. COVID-19 can live for hours or days on a surface, depending on factors such as sunlight, humidity, and the type of surface. Social distancing helps limit opportunities to come in contact with contaminated surfaces and infected people outside the home.

Although the risk of severe illness may be different for everyone, anyone can get and spread COVID-19. Everyone has a role to play in slowing the spread and protecting themselves, their family, and their community.

Tips for social distancing

- Follow guidance from authorities where you live.
- If you need to shop for food or medicine at the grocery store or pharmacy, stay at least 6 feet away from others. Also consider other options:
 - Use mail-order for medications, if possible.
 - Consider a grocery delivery service.
- Cover your mouth and nose with a [cloth face covering](#) when around others, including when you have to go out in public, for example to the grocery store.
 - Cloth face coverings should NOT be placed on children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.
 - Keep at least 6 feet between yourself and others, even when you wear a face covering.
- Avoid gatherings of any size outside your household, such as a friend's house, parks, restaurants, shops, or any other place. This advice applies to people of any age, including teens and younger adults. Children should not have in-person playdates while school is out. To help maintain social connections while social distancing, learn [tips to keep children healthy while school's out](#).
- Work from home when possible. See additional information for [critical infrastructure workforce](#) from Cybersecurity and Infrastructure Security Agency (CISA).
- Limit using any kind of public transportation, ridesharing, or taxis, if possible. If you must use public transportation, [follow these tips to protect yourself](#).
- If you are a student or parent, talk to your school about options for digital/distance learning.

Stay connected while staying away. It is very important to stay in touch with friends and family that don't live in your home. Call, video chat, or stay connected using social media. Everyone reacts differently to stressful situations and having to socially distance yourself from someone you love can be difficult. [Read tips for stress and coping](#).



Need help? Know someone who does?

If you, or someone you care about, are feeling overwhelmed with emotions like sadness, depression, or anxiety, or feel like you want to harm yourself or others

- Call 911
- Visit the [Disaster Distress Helpline](#), call 1-800-985-5990, or text TalkWithUs to 66746
- Visit the [National Domestic Violence Hotline](#) or call 1-800-799-7233 and TTY 1-800-787-3224

More Information

- [How to Protect Yourself](#)
- [Cleaning and Disinfecting Your Home](#)
- [Gatherings and Community Events](#)



Centers for Disease
Control and Prevention

USE OF CLOTH FACE COVERINGS TO HELP SLOW THE SPREAD OF COVID-19



Your cloth face covering may protect them. Their cloth face covering may protect you.

- [About Cloth Face Coverings](#)
- [Wearing Cloth Face Coverings](#)
- [Recommendations](#)
- [Making Cloth Face Coverings](#)
- [Washing Cloth Face Coverings](#)

INTERIM GUIDANCE ON CAMPERS AND STAFF WITH PREEXISTING MEDICAL CONDITIONS

According to the White House and Centers for Disease Control and Prevention (CDC) guidelines, COVID-19 is a new disease and there is limited information regarding risk factors for severe disease. Anyone can experience mild to severe symptoms. In the CDC [camp decision making tool](#), an important criterion in deciding whether to open camp is stated as follows: "Are you ready to protect children and employees at [higher risk](#) for severe illness?" Camp directors and administrators are advised to implement pre-screening of campers and staff for medical clearance to attend camp by their primary care providers *before* presenting to camp. Primary care providers are best positioned to make a professional judgement based upon an individual's health status and their suitability for the camp environment at this time. This information provides camp directors with information on what precautions are required or may be appropriate to protect those at higher risk for severe illness.

PEOPLE AT HIGH RISK OF SEVERE ILLNESS FROM COVID-19

Currently, information indicates that older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19. Those at high risk for severe illness from COVID-19 are people aged 65 years and older and people who live in a nursing home or long-term care facility.

Those at high risk include people of all ages with [underlying medical conditions, particularly if not well controlled](#), including:

- People with chronic lung disease or moderate to severe asthma
- People who have serious heart conditions
- People who are immunocompromised
 - Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications.
- 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

TRANSPORTATION TO OR FROM CAMP

This section is relevant to both day camps as well as sleep away camps whether campers will be dropped off directly at camp or at central meeting locations and transported collectively to camp.

ADMINISTRATION - DROP OFF

- Create a drop off schedule in which groups of campers are to be dropped off at camp during staggered timeframes.
- The specific length and number of timeframes and numbers of drop offs per timeframe will vary based on the number of campers and configuration of the drop off area, etc.; aim to reduce density and physical interaction of individuals at any given time in the drop off area.
- Send communications to parents/guardians that assign each camper their drop off time window. Explain the purpose of the window and encourage them to:
 - Minimize the time they take saying goodbye to allow for the continual flow of traffic
 - Say goodbye close to or inside their vehicles
 - Maintain physical distance with other parents/guardians and campers
 - Wear a cloth face mask when exiting the vehicle
- For day camps: Communicate to parents/guardians the benefits of designating one parent/guardian to drop off campers every day. Individuals who are at [higher-risk for severe illness](#) per CDC guidance should not drop off or pickup campers.
- Best practice: Prepare relevant posters and signage from the Centers for Disease Control and Prevention ([CDC](#)), World Health Organization ([WHO](#)), and/or other health agencies and post them at the drop off location. Refer to the Communication section of this guide. Examples include:
 - [COVID-19 information](#)
 - [Handwashing](#)
 - [Cough etiquette](#)
 - [Symptoms associated with COVID-19](#)
 - [Stop the spread of germs](#)
 - [Physical distancing](#)

CAMPER AND STAFF INTAKE

- Allow for campers and staff to wash hands with soap and water for 20 seconds or use alcohol-based hand sanitizer containing at least 60% alcohol upon entry to the drop off area.
- If campers are being dropped off at central meeting locations and transported to camp, perform initial health screening of campers at the drop off location, before they board buses or vans, if possible. Otherwise, perform the initial health screening upon arrival to camp. See Screening Campers and Staff section.
- If campers are being dropped off directly at camp, perform initial health screening of campers upon arrival. See Screening Campers and Staff section
- Best practice: Greet campers and perform initial health screenings outside as they arrive.
- Upon arrival to camp, distribute disinfecting wipes to campers and direct them to disinfect their baggage or provide trained staff to do so, giving special attention to the handles and other non-porous portions. See the Cleaning section of this guide for disinfectant specifications.

CAMPER AND STAFF PICK UP

- Create a pickup schedule in which groups of campers and staff are to be picked up from camp during staggered timeframes.
- The specific length and number of timeframes and numbers of pickups per timeframe will vary based on the number of campers and configuration of the pickup area, etc.; aim to reduce density and physical interaction of individuals at any given time in the drop off area.
- Send communications to parents/guardians that assign each camper their pick up time window. Explain the purpose of the window and encourage them to:
 - Minimize the time they take to pick up campers to allow for the continual flow of traffic.
 - Stay close to or inside their vehicles, if possible.
 - Maintain physical distance with other parents/guardians and campers.
 - Wear a cloth face covering when exiting the vehicle.
- Best practice: Create a system in which campers are escorted to their parent's/guardian's vehicle.
- For day camps: Communicate to parents/guardians the benefits of designating one parent/guardian to pick up campers every day. Individuals who are at [higher-risk for severe illness](#) per CDC guidance should not drop off or pickup campers.

BUSES AND VANS

If campers are being dropped off at central meeting locations and transported collectively to camp, follow these guidelines.

- Use buses and vans that have cargo storage separate from the passenger cabins, if possible.
- Identify a camp staff member to receive luggage from passengers, place it in the storage area, then later unload all luggage. The staff member should wear a cloth face covering and gloves during this process.
- See *Travel by Bus or Van* section.

CAMPERS AND STAFF

- Be ready early to ensure you meet your scheduled drop off time.
- When being dropped off, don't take too long to say goodbye. Other campers will be waiting to be dropped off.
- Say goodbye close to or inside the vehicle.
- Maintain physical distance with other parents/guardians and campers.
- Upon arrival to camp, disinfect your baggage using wipes or wait until a staff member does so, giving special attention to the handles and other non-porous portions.

PARENTS/GUARDIANS

- Abide by the drop off and pick up schedule by dropping off and picking up campers during their assigned drop off timeframe. If a scheduling conflict makes this difficult, reach out to camp administration to find a more convenient time.
- Minimize the amount of time used for saying goodbye to campers to allow for the continual flow of traffic.
- Say goodbye close to or inside your vehicle.
- Maintain physical distance with other parents/guardians and campers.
- Wear a cloth face covering when exiting the vehicle.
- Designate one parent/guardian to pick up and drop off campers every day. Individuals who are at higher-risk for severe illness per CDC guidance should not drop off or pickup campers.
- Allow for campers to wash hands with soap and water for 20 seconds or use alcoholbased hand sanitizer containing at least 60% alcohol upon return home.
- Generally, teach and practice good respiratory hygiene/cough etiquette within the household.

VEHICLE OPERATORS

See guidance in the Travel by Bus or Van section.

REFERENCES AND RESOURCES

U.S. Centers for Disease Control and Prevention. Guidance for Childcare.

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-forchildcare.html#pickup>

INTERIM GUIDANCE ON TRAVEL BY BUS OR VAN

The following provides suggested general guidance and procedures while travelling by bus, van, or other communal vehicles.

Recommendations are made for camp administration, vehicle driver/operators, passengers (e.g., campers and camp staff), and custodial staff. Note: Vehicular means of transportation are recommended only when necessary. If the destination can reasonably be reached by other means (walking, jogging, bicycling, hiking, etc.), it may be beneficial to plan travel to the destination using those alternatives.

ADMINISTRATION

- Maintain a roster of qualified, trained, and licensed staff to fill critical transportation positions.
- Stock disposable gloves, facemasks, and cleaning supplies. Enact a plan for the distribution, disposal, cleaning (when appropriate), and resupply of these items.
- Instruct transportation staff to report respiratory illness symptoms to their supervisors or camp administration.
- Best practice: All transportation employees are screened at the beginning of their shifts for signs of illness.
- Actively encourage sick employees to stay home and implement flexible sick leave.
- Provide staff and campers with access to soap and clean running water or alcoholbased hand sanitizer, and face masks. Train staff and campers on proper hand washing and sanitizing procedures.
- Best practice: Vehicle operators should wear N95 respirators while carrying passengers. Employees must be medically cleared, fit-tested and trained to wear
- N95 respirators on an annual basis.
- Provide custodial staff with [EPA-approved disinfectants](#) for vehicle cleaning.
- If possible, use larger vehicles or a greater number of vehicles in order to allow passengers to maintain greater physical distance.
- Reduce the number of available seats in order to increase physical distance between passengers. Mark restricted seats using signage, decals, colored string, tape, etc.

- Best practice: Leave several front rows of seating unavailable to maintain social distance for the driver/operator.
- If the same vehicle will be used multiple times, assign seats to campers so they occupy the same space each time. Clean and disinfect the vehicle between use.
- If possible, seek vehicles with clear, impermeable barriers between operators and rest of the cabin. Options include plexiglass, or flexible plastic sheeting. This equipment must be used only according to manufacturer and vehicle safety guidelines.

CAMPERS AND STAFF AS PASSENGERS

- Do not board if you are sick or experiencing any flu-like symptoms.
- Wash or sanitize hands before boarding bus, van, or vehicle.
- Practice good hygiene: cough or sneeze into your elbow and avoid touching your mouth, nose, and eyes.
- If possible, maintain physical distance by maximizing distance between yourself and other passengers.
- Wear a facemask while riding in the vehicle.
- If re-boarding the vehicle, sit in the same seat, or your assigned seat, each time.
- When exiting, remove all belongings and discard all waste.

VEHICLE OPERATORS

- Do not operate if you are sick or experiencing flu-like symptoms.
- At a minimum, wear a facemask. Ensure face mask does not impact vision or the ability to operate the vehicle safely.
- Wear appropriate gloves. Ensure gloves do not impact the ability to operate the vehicle safely.
- Best practice: Wear an N95 respirator. Employees must be medically cleared, fittested and trained to wear N95 respirator annually. Ensure respirator does not impact vision or the ability to operate the vehicle safely.
- Maintain physical distance by limiting interactions with passengers.
- When possible and safe to do so, operators should open windows prior to campers boarding. If not possible nor comfortable to open windows, set ventilation system to high. Do not recirculate conditioned air.
- Wash hands using soap and water for at least 20 seconds or disinfect hands using alcohol-based hand sanitizer before and after work shifts and breaks, and after touching frequently touched surfaces.

CLEANING AND DISINFECTION PERSONNEL

- Do not work if you are sick or experiencing flu-like symptoms.
- Wear disposable gloves and a facemask.
- Best practice: Disposable gowns are worn during cleaning and disinfection.
- Clean and disinfect vehicles daily. Best practice: Clean and disinfect the vehicle before and after each use during the day.
- Always clean and disinfect the vehicle's commonly touched surfaces between user groups or route runs.
- If hard non-porous surfaces (e.g., hard seats, handles, doors, windows, etc.) are visibly dirty, clean them with a detergent or with soap and water before disinfecting.
- Disinfect hard non-porous surfaces using the following:
 - [EPA Registered Antimicrobial Products for Use Against Novel Coronavirus SARSCoV-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.
 - Alcohol-based solutions containing at least 70% alcohol.
- If soft or porous surfaces (e.g., fabric seats, upholstery, carpets) are visibly dirty, clean them using appropriate cleaners and then disinfect soft or porous surfaces using [EPA Registered Antimicrobial Products for Use Against Novel Coronavirus SARS-CoV-2.](#)

- If frequently touched electronic surfaces (e.g., cabin controls, touch screens, 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, masks, and gowns (if applicable) immediately upon exiting the vehicle.
- Immediately after cleaning and disinfection (and before taking breaks), wash hands using soap and water for at least 20 seconds or disinfect hands using alcohol-based hand sanitizer.
- If disposable gowns are not worn, immediately launder cloths (or uniform) worn using the warmest appropriate water and dry completely. Wash hands immediately after handling dirty laundry. See the Cleaning section for more details on laundry practices.
- For more information, follow CDC guidance on cleaning and disinfecting.

FOR FURTHER INFORMATION:

U.S. Centers for Disease Control and Prevention. Bus Transit Operators.

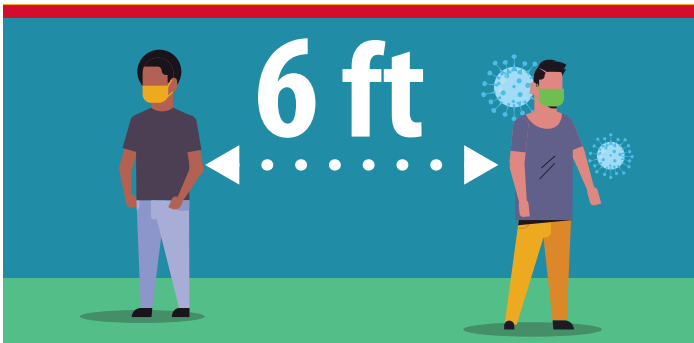
<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator.html>

U.S. Centers for Disease Control and Prevention. Disinfecting Transport Vehicles.

<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/disinfecting-transport-vehicles.html>

STOP THE SPREAD OF GERMS

Help prevent the spread of respiratory diseases like COVID-19.



Stay at least 6 feet (about 2 arms' length) from other people.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands.



When in public, wear a cloth face covering over your nose and mouth.



Do not touch your eyes, nose, and mouth.



Clean and disinfect frequently touched objects and surfaces.



Stay home when you are sick, except to get medical care.



Wash your hands often with soap and water for at least 20 seconds.

STOP GERMS! WASH YOUR HANDS

When?

- After using the bathroom
- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone at home who is sick with vomiting or diarrhea
- After changing diapers or cleaning up a child who has used the toilet
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage



How?



Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.



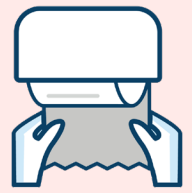
Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.



Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.



Rinse hands well under clean, running water.

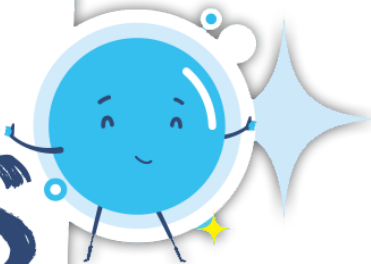


Dry hands using a clean towel or air dry them.

Keeping hands clean is one of the most important things we can do to stop the spread of germs and stay healthy.

LIFE IS BETTER WITH

CLEAN HANDS



CENTERS FOR DISEASE CONTROL AND PREVENTION

www.cdc.gov/handwashing