



# Guidelines for Camp Operations During COVID-19

For Use in Licensed Children's Camps  
Revised April 14, 2021

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**Note:** This guidance was developed with consideration of printed materials from the Centers for Disease Control and Prevention (CDC), American Camp Association, and the Association of Camp Nurses. This guidance does not constitute legal advice and is subject to change. Licensees are encouraged to seek legal counsel to ensure their operations comply with all applicable laws, rules, epidemic orders, public acts and other orders. LARA will continue to monitor best practices and will issue updated guidance as our collective knowledge of COVID-19 continues to improve. Visit [www.michigan.gov/coronavirus](http://www.michigan.gov/coronavirus) for updates. New versions of this document will be posted online and shared electronically with all licensed camps.

## Introduction

Camp providers across the state have always prioritized the health and safety of the children in their care. With the spread of COVID-19, new health and safety protocols are necessary to ensure children, families, and staff members are as safe as possible.

This document is intended to help camps mitigate some of the risk associated with opening a camp during the COVID-19 pandemic. This document offers considerations and actions to take before opening for the season. It also includes specific health and safety protocols for camps to follow during operations.

COVID-19 is mostly spread by respiratory droplets released when people talk, cough, or sneeze. The virus may spread to hands from a contaminated surface and then to the nose or mouth, causing infection. Therefore, personal prevention practices (such as [wearing masks](#), [handwashing](#), and [staying home when sick](#)), environmental [cleaning and disinfection](#), and [ventilation](#) are important principles that are covered in this document. Fortunately, there are several actions youth camp administrators can take to help lower the risk of COVID-19 exposure and spread during camp sessions and activities.

This document represents the best available recommendations as of the date of release. Guidelines will be updated as recommendations from the Michigan Department of Health and Human Services (MDHHS) and Centers for Disease Control and Prevention (CDC) change.

**Reminder:** All camps are required to follow MDHHS Epidemic Orders issued related to COVID-19. These guidelines are recommendations meant to assist camps to reduce the risk of COVID-19 exposure and community spread. While licensing will not establish a violation based on these guidelines, areas that are addressed in administrative rules could be cited if not in compliance. Please visit [Michigan.gov/coronavirus](https://www.michigan.gov/coronavirus) for up-to-date information. Links to pages specific to camps are included throughout this document.

**Note:** Additional guidance about residential camps is listed in the addendum section of this document.

## Required Action: COVID-19 Response Plan

Camps must develop and implement a **COVID-19 response plan** consistent with the guidelines in this document. Licensing Rules for Camps require a camp to have procedures for preventing disease transmission detailed within their health services policies per R 400.11119 (3)(j). Additionally, all businesses are required to have a written COVID-19 response plan per MIOSHA rules. The response plan must be available at your camp or camp headquarters. Response plans must be made available to families and staff.

Your plan should include:

- How you will monitor symptoms of COVID-19.
- How your programs practice social distancing.
- How you will ensure proper hygiene (including regular cleaning and disinfecting).
- How you will obtain, and the use of, safety equipment (including PPE, when appropriate).

- Communication protocol to report symptoms or a positive test.
- Isolation procedure in case of symptoms or confirmed cases onsite.

Your licensing consultant may request to review the response plan; however, response plans do not need to be submitted to licensing for approval.

It is strongly recommended that you discuss your plan with staff from the [local health department](#) so that all roles and responsibilities are clarified, and updated contact information is included. It is also recommended that the local health department be provided with a final version of your response plan. In most jurisdictions throughout Michigan, the local health department will be leading any case investigation and contact tracing in the event that a camper or staff member develops symptoms of COVID-19 or is confirmed to have COVID-19. All determinations regarding isolation of ill campers/staff or quarantine of their close contacts will be at the direction of the local health department or the local health department's designee. Local health department staff are also prepared to assist with decisions regarding the need for clinical evaluation of campers or staff with COVID-19 symptoms and can connect you with timely testing resources in the area.

In every element of your plan, consider how to mitigate risk as you scale up operations. The scope and nature of mitigation required will vary depending on the level of COVID-19 in your community and the communities you are accepting campers from. Camps limited to participants from the surrounding community are at lower risk for transmission of COVID-19 at their camp and lower risk for acting as a transmission site that may facilitate spread from geographic areas with higher transmission rates to geographic areas with lower transmission rate.

## Communication and Training

### Proactively Contact Staff Members<sup>1</sup>

Camps should reach out to all staff members to:

- Plan to get vaccinated
  - All Michigan residents over age 16 are now eligible to be vaccinated.
  - A [fully vaccinated person](#) is one who meets either of the following:
    - 2 weeks after their second dose in a 2-dose series (Pfizer, Moderna)
    - 2 weeks after a single-dose vaccine (Johnson & Johnson)
  - A camp operator can set up a vaccination clinic for staff with their [local health department](#).
  - Staff members can also schedule their own appointments by:
    - **Check the website** of your [local health department](#) or hospital for sign-ups or registration forms.
    - **Call the COVID-19 Hotline at 888-535-6136** Monday through Friday from 8 a.m. to 5 p.m. and Saturday through Sunday 8 a.m. to 1 p.m. Or **call 2-1-1**. Multiple languages are available.

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<sup>1</sup> For purposes of the guidance document, the term staff members include paid employees and volunteers.

- **Check additional vaccination sites**, such as local pharmacies like [Meijer](#), [RiteAid](#), [Kroger](#), [CVS](#), [Walmart](#) (Mid/Central and Northern MI) or [Snyder Drugs](#) (U.P. residents);
- To register for the West Michigan Vaccine Clinic at DeVos Place in Grand Rapids go to [West Michigan Vaccine Clinic \(spectrumhealth.org\)](https://www.spectrumhealth.org/wm-vaccine-clinic).
- To register for the Regional Community Vaccination Site at Ford Field in Detroit go to <https://clinic.meijer.com/register/CL2021> or text EndCOVID to 75049.
- Discuss any health concerns/conditions which may put a staff member at higher risk for complications if exposed to COVID-19. Take care to respect employee's privacy. Staff with underlying health conditions or at higher risk should consult with their primary care provider before committing to work.
- Share the steps you are taking, including the response plan, to make the camp as safe as possible.

### **Create a Staffing Plan**

- Assess staffing needs based on projected enrollment and the need to practice physical distancing within small groups.
- Consider developing a policy on how you will handle the potential need to isolate staff or allow for longer absences from work than normal and considering out-of-state or international staff.

### **Out-of-Country Staff**

- Staff who travel to Michigan from another country to work at camp should follow all [CDC guidance for after travel precautions](#).

### **Train Staff**

Camps are required to train all staff about COVID-19 and their response plan per [MIOSHA emergency rules](#). This includes:

- Workplace infection-control practices.
- The proper use of personal protective equipment.
- How to report unsafe working conditions.
- Signs and symptoms of COVID-19.
- Steps the employee must take to notify the camp of any symptoms of COVID-19 or a suspected or confirmed diagnosis of COVID-19.

### **Camp response plan for suspected or confirmed case of COVID-19.**

The camp must provide updated training if it changes its preparedness and response plan, or new information becomes available about the transmission or diagnosis of COVID-19. The camp is required to maintain a record of all COVID-19 employee training for 1 year from time of generation.

### **Provide Resources to Support Campers' Social Emotional Needs**

Camps should partner with staff members to develop a plan to support the emotional reactions of campers returning to a social, structured environment like camp. Some campers will be excited, while some will have initial challenges with separation from their parent(s), and some may act out toward other campers. Whatever the reaction, staff may need some new tools in their toolkit to assist the camper with emotional regulation. The American Academy of Pediatrics offers helpful tools at [Healthychildren.org](https://www.healthychildren.org).

### **Provide Resources to Support Staff Members' Social Emotional Needs**

To ensure the well-being of the campers, it is also imperative to ensure the well-being of their staff, and to provide them with the emotional and administrative supports necessary during this time of re-integration. The [Michigan Department of Health and Human Services](https://www.michigan.gov/health) offers helpful tools.

### **Proactively Contact Families**

For camps to operate as safely as possible, families will need to play a key role in risk mitigation. Camps are encouraged to also communicate a summary of their plans for mitigating risk of COVID-19 transmission at camp and responding to any camper who may develop symptoms of COVID-19. Camps should contact applicant parents and guardians that wish their child to attend camp to:

- Discuss concerns or questions families have about attending camp and how you can address them together.
- Educate parents on the response plan and new expectations related to COVID-19.
  - Explain that health screenings will be conducted daily.
  - Set the expectation that parents should screen their children at home before arriving at camp as well. Children with a fever or other COVID-19 symptoms should stay home.
- Explain the camp's communication plan including how the camp will communicate with parents about regular operations and health emergencies. Parents should provide multiple forms of contact information to allow operators to quickly contact parents if a camper gets sick and needs to be picked up.
- Discuss any health concerns/conditions which may make the camper at higher risk for complications if exposed to COVID-19. Remind families that immunocompromised campers and campers with chronic health conditions should consult with their primary care provider regarding decisions about camp attendance.
- Camps that serve campers with disabilities should consult additional guidance from the [CDC](https://www.cdc.gov) on best practices for keeping campers safe.

While immunizations are not always required to attend camp, it is recommended that children should be up to date with current vaccination schedules to protect from vaccine-preventable infectious disease outbreaks, including influenza.

## Monitor and Respond to Symptoms of COVID-19 in Campers

### When Should a Sick Child Stay Home?

Camps should strictly enforce their health services policy, especially during flu season. The presence of any of the symptoms below generally suggests a child has an infectious illness and should not attend camp, regardless of whether the illness is COVID-19. For campers with chronic conditions, a positive screening should represent a change from their typical health status.

- [Temperature](#) of 100.4 degrees Fahrenheit or higher
- Sore throat
- Cough (for campers with chronic cough due to allergies or asthma, a change in their cough from baseline)
- Difficulty breathing (for children with asthma, a change from their baseline breathing)
- Diarrhea or vomiting
- New onset of severe headache, especially with a fever

Campers should also stay home if they:

- Are in quarantine due to exposure to an individual with a confirmed case of COVID-19 or
- Have other signs of illness described in a camp's health services policy.

Camps should encourage families to contact their healthcare provider or follow up with a local clinic/urgent care before coming to camp.

### *Additional Resources*

For additional guidelines for monitoring (Pre-Screening) overnight campers prior to camp see Addendum: Residential Camp Guidelines.

The CDC has additional guidance about [screening K-12 students for symptoms](#) of COVID-19 which may be helpful to camps. They also have [signs](#) available in multiple languages to help share symptoms with families.

### Where Can Campers Get Tested for COVID-19?

If family is concerned that their child may have COVID-19, they should contact their healthcare provider or follow up with a local clinic/urgent care. Families can also find a testing site using the [Testing Site Look Up Tool](#) or call the COVID-19 hotline at 888-535-6136 for help finding a site near you.

### When Can A Sick Camper Return to Camp?

When a camper can return to camp depends on their symptoms, whether they have a high risk for COVID-19 exposure, and whether they test positive.

A child has a high risk of COVID exposure if they have had close contact with a person with COVID-19 within the past 14 days.

Close contact includes exposures within six feet of a person with COVID-19 for 15 minutes or more within a 24-hr period. This includes brief exposures totaling 15 minutes in a 24-hour period. Close contact also includes having direct contact with infectious secretions of a person with COVID-19 (e.g., being coughed on).

### ***If a Camper Tests Negative for COVID-19 or No Testing Was Done***

#### *No Testing Was Done*

- If a camper visits a healthcare provider and another cause is identified for the symptoms, the individual may return to camp once symptoms improve and they have been fever-free for at least 24 hours without the use of medicine that reduces fevers.
- If a test is not done and another cause for symptoms is not identified, the individual should stay home until:
  - Has been fever-free for at least 24 hours without the use of medicine that reduces fevers **AND**
  - Other symptoms have improved **AND**
  - At least 10 days have passed since symptoms first appeared.

#### *Tests Negative*

- If a camper was not exposed to COVID-19, a camper may return to camp based on a camp's health services policy.
- If a camper was exposed to COVID-19 within the past 14 days, current [MDHHS guidelines](#) recommend they quarantine for 14 days, even with a negative test result and follow all instruction from the local health department.
  - If symptoms appear, the camper should be immediately isolated and contact the [local health department](#) or a health care provider.
- Campers aged 16 years and older who are fully vaccinated do not have to quarantine after exposure to COVID-19, provided they do not have symptoms.

### ***If a Camper Tests Positive for COVID-19***

Camps must cooperate with the local public health department to determine when a camper may return to camp after testing positive for COVID-19. In general, individuals must stay home until they:

- Have been fever-free for at least 24 hours without the use of medicine that reduces fevers **AND**
- Other symptoms have improved **AND**
- At least 10 days have passed since symptoms appeared or the individual tested positive.

Most campers can return to camp based on improved symptoms and the passage of time. There is no need to get a negative test or a doctor's note to clear the camper to return to camp.

### **Should Camps Check Campers' Symptoms When They Arrive?**

It is recommended you screen campers daily before arrival. You should determine the best screening method to use depending on local conditions. This may include universal screening on your site or asking parents to screen children prior to arrival.

Parents or caregivers should always be strongly encouraged to monitor their children for signs of infectious illness every day prior to sending children to camp.

The CDC has additional guidance about [screening K-12 students for symptoms](#) of COVID-19 which may be helpful to camps.

### **How Should Camps Check Campers' Symptoms When They Arrive?**

Before children arrive:

- Identify a location to check for symptoms if you perform screenings. Pick a location away from other children and families.
- Encourage families to check symptoms before coming to camp and keep sick children home. To support families with sick children,
  - Identify a staff person who will be responsible for handling questions and reporting about COVID-19 concerns.
  - Families should know who this person is and how to contact them to report illness or possible exposure.

*For additional information about pre-screening residential campers see Addendum: Residential Camp Operating Guidelines.*

### **When campers arrive:**

- Staff should:
  - Wear a face mask.
  - Wear eye protection in areas of moderate to substantial transmission. For areas with minimal to no community transmission, eye protection is considered optional, unless otherwise indicated as part of standard precautions.
  - Wear gloves. Staff should change gloves and complete hand hygiene (soap and water or alcohol-based hand sanitizer) between each screening.
- Ask parents and campers:
  - Has your child been in [close contact](#) with a person who has COVID-19? (If yes, the child should quarantine for at least 14 days after the last exposure, even with a negative test result).
  - Has your child felt unwell in the last 24 hours (a fever of 100.4 degrees or above or signs of fever (chills/sweating) vomiting, diarrhea, abdominal pain, sore throat, new uncontrolled cough that causes difficulty breathing, new onset of severe headache)?
- Make a visual inspection of the camper for signs or illness which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness, and confirm that the camper is not experiencing coughing or shortness of breath.
- Perform temperature checks.
  - Have multiple thermometers available for screening.

- Thermometers should be cleaned and disinfected between uses, following the manufacturer's instructions.
- Temperatures can be taken using oral, tympanic (ear), or temporal (forehead) scanners.

The CDC offers additional guidance for [how to practically conduct these checks](#).

***Additional recommendations:***

- Make sure you have the necessary supplies for daily temperature checks including wipes, thermometers (touchless if possible), alcohol-based hand sanitizer, tissues, face masks/cloth face masks, etc.
- Make sure staff members are trained on the temperature check process and there is someone assigned to conduct monitoring.
- Be clear with families and staff about what happens if a camper or shows symptoms.

**What Should a Provider Do if a Camper is Sick During the Day?**

- Send anyone who becomes ill home immediately.
- Isolate the camper in a safe location until the camper can be picked up. If the camper is 2 or older, the camper should wear a face mask. Do not leave a camper alone. Any staff member caring for a camper must wear a face mask as well.
- The [CDC](#) offers guidance for how to watch for warning signs that symptoms are escalating and how to keep yourself safe when caring for someone who is sick.
- Encourage anyone that is ill to visit their primary care provider.

**Monitor and Respond to Symptoms of COVID-19 in [Adults](#)**

**When Should a Sick Staff Member Stay Home?**

Camp operators should strictly enforce their health services policy, especially during flu season. Staff members should stay home, or be sent home, if they are experiencing any of the following symptoms not explained by a known or diagnosed medical conditions:

**ONE** of the following:

- Fever of 100.4 degrees or above
- Shortness of breath
- Uncontrolled cough

**OR TWO** of the following:

- Diarrhea
- Loss of taste or smell
- Muscle aches without another explanation
- Severe headache
- Sore throat
- Vomiting
- Chills

Staff members should also stay home if they are in quarantine due to exposure to an individual with a confirmed case of COVID-19 or if they have other signs of illness described in a camp's health services policy.

Quarantine is not required for staff members who are fully vaccinated and remain asymptomatic after an exposure to COVID-19. If a person is having symptoms, even if they are fully vaccinated, they should get tested and isolate.

Use signage to remind employees about [symptoms](#) to watch for and to [stay home](#) when they are sick.

### ***Protections for Employees***

Providers should allow staff who are not feeling well to remain home without penalty. Under [Public Act 238 of 2020](#) 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.

### **Where Can Staff Members Get Tested?**

If staff member is sick or if someone close to them is sick or has symptoms, they may want to get tested. Staff members can identify a testing site using the [Testing Site Look Up Tool](#) or by calling the COVID-19 hotline at 888-535-6136 for help finding a site near you.

### **When Can a Sick Staff Member Return to Work?**

When a staff member can return to work depends on their symptoms, whether they have a high risk for COVID exposure, whether they test positive, and whether they have been fully vaccinated.

- A staff member has a *high risk of COVID exposure*, if they have experienced any of the following in the past 14 days:
  - Had close contact with a person with COVID-19.
  - Had close contact with a person under quarantine for possible exposure to COVID-19.
- *Close contact* includes exposures within six feet of a person with COVID-19 for 15 minutes or more within a 24-hour period. This includes brief exposures totaling 15 minutes in a 24-hour period. Close contact also includes having direct contact with infectious secretions of a person with COVID-19 (e.g., being coughed on).

Employers should not require sick employees to provide a COVID-19 test result or healthcare provider's note to validate their illness, qualify for sick leave, or return to work.

**Note for Vaccinated Staff:** Remaining home from work is not required for fully vaccinated individuals as long as they remain asymptomatic. If any symptoms develop, the person must isolate immediately and should visit a healthcare professional for assessment.

## ***If a Staff Member Tests Negative or No Testing Was Done***

### *No Testing Was Done*

- If a staff member visits a healthcare provider and another cause is identified for the symptoms, the individual may return to care once symptoms improve and they have been fever-free for at least 24 hours without the use of medicine that reduces fevers.
- If a test is not done, the individual should stay home until:
  - Has been fever-free for at least 24 hours without the use of medicine that reduces fevers **AND**
  - Other symptoms have improved **AND**
  - At least 10 days have passed since symptoms first appeared.

### *Tests Negative*

- If a staff member was not exposed to COVID-19 and received negative test result, they may return to care based on a camp's health services policy.
- If a staff member was exposed to COVID-19 within the past 14 days, current [MDHHS guidelines](#) recommend they quarantine for 14 days, even with a negative test result and follow all instruction from the local health department.
  - If symptoms appear, the staff member should be immediately isolated and contact the [local health department](#) or a health care provider.

## **If a Staff Member Tests Positive for COVID-19**

Camps must cooperate with the local public health department to determine when a staff member may return to camp and work after testing positive for COVID-19. In general, individuals must stay home until they:

- Have been fever-free for at least 24 hours without the use of medicine that reduces fevers **AND**
- Other symptoms have improved **AND**
- At least 10 days have passed since symptoms appeared or the individual tested positive.

Most staff members can return to work based on improved symptoms and the passage of time.

## **Should Employers Check Staff Members' Symptoms When They Arrive?**

Yes. Employers must implement a daily self-screening protocol for all employees entering the workplace—including, at a minimum, a questionnaire covering symptoms and suspected or confirmed exposure to people with possible COVID-19, as required by the Gatherings and Face Mask Order ([March 19, 2021](#)) issued by MDHHS.

Employers can create a workplace screening tool or use a virtual screener. One option is MI Symptoms, a free online tool from the state to help organizations screen their members for COVID-19 symptoms: <https://misymptomapp.state.mi.us/login>. Per MIOSHA rules, the employer must keep a record of screening for each employee or visitor entering the workplace for 1 year from time of generation.

## **What Should a Camp Do If a Staff Member is Sick During the Day?**

If a staff member begins to feel ill during the day, they should go home if possible or quarantine. If an individual is the only caregiver, they should limit close interactions with campers until they can be relieved by another staff member.

The [CDC](#) offers guidance for how to watch for warning signs that symptoms are escalating and how to keep yourself safe when caring for someone who is sick. Encourage anyone that is ill to visit their primary care provider.

## Report a Confirmed Case of COVID-19

### If a Camper or Staff Member Has a Confirmed Case of COVID-19

**1. Report the case to your [local health department](#) and respond to questions such as:**

- When was the staff/camper in attendance?
- Who is the staff/camper near (less than six feet) throughout the day?
- Has there been adequate physical distancing throughout the day?
- Are there others at the camp that live with the staff or camper in the same household?
- When are face masks worn in the camp?

Your local health department will also ask you to participate in contact tracing to limit the spread of the virus.

To help, camp operators should collect the contact information for any [close contacts](#) of the affected individual while at camp from two days before he or she showed symptoms or tested positive to the time when he or she was last present in camp. The local health department will ask for this information to support contact tracing. A close contact includes:

- Being within six feet of someone who has COVID-19 for a total of 15 minutes or more within a 24-hour period. This includes brief exposures totaling 15 minutes in a 24-hour period.
- Having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).

**2. Determine the appropriate steps to take to reduce transmission.**

- Your local health department will assess your specific situation and identify the steps you should take to reduce transmission. This may include possibly closing a camp operation.
- At a minimum, your local health department will recommend the camp be cleaned, and they may recommend that everyone in that cabin or camp be quarantined for up to 14 days.
- The local health department may also recommend a 14-day quarantine for all other close contacts.

**If you cannot reach your local health department immediately:**

- Monitor campers and staff members for symptoms.

- Clean and disinfect your facility. If possible, close off the area for at least 24 hours before cleaning. If that is not feasible, wait as long as possible and then clean and disinfect the facility following [CDC guidance](#).
- Clean high touch surfaces more frequently.
- Clean hands more frequently.
- Wear a face mask, whenever possible.

Local health departments typically respond within 24 hours. If you don't receive a response within 24 hours, reach out to them again.

- 3. Camp operators are required to submit an incident report to the department** if a camper is sent home for illness or stays overnight in a hospital or clinic. While not required, we encourage you to contact your licensing consultant to discuss any COVID-19 related questions in your camp operation.

- 4. Notify families and staff members.**

You are required to notify families of possible exposure to a communicable disease, like COVID-19. Your local health department can help you do this. Speak with your local health department before notifying families. Remember to maintain confidentiality consistent with the Americans with Disabilities Act (ADA) and other applicable federal and state privacy laws. Even if a family/student acknowledges and publicly discloses a positive test, staff must not participate in discussions or acknowledge a positive test.

## Reinforce Best Practices to Promote Hygiene

Camp operators are experts in limiting the spread of illness. Reinforce the best practices you already use with campers and staff members to limit the spread of COVID-19 too.

### Hand Washing

Reinforce regular health and safety practices with campers and staff. Wash hands often with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, sneezing; going to the bathroom; and before eating or preparing food.

- Continue to implement CDC [handwashing guidelines](#). Wearing gloves does not replace appropriate hand hygiene.
- Soap and water are the best option, especially if hands are visibly dirty. If you use hand sanitizer, use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.
- Continue to cover coughs with a tissue or sleeve. The CDC has [flyers](#) you can print and post in your facility.
- Systematically and frequently check and refill soap and hand sanitizers.

### Cleaning and Disinfecting

If possible, cleaning staff should wear gloves and a face shield (in addition to a face mask) when performing cleaning and disinfecting of these areas for personal protection from chemicals.

- **Frequently touched surfaces** (including light switches, door handles, playground equipment, benches, bathrooms) should be cleaned and disinfected at least daily with either an EPA-[approved disinfectant](#) or diluted bleach solution.
- **Common areas** require at least a daily deep clean (for example, sinks, bathrooms, doorknobs, tabletops, and shared items). Use these guidelines from the CDC for [cleaning and disinfecting](#).
- **Outdoor areas, like playgrounds**, require normal routine cleaning, but do not require disinfection.
  - Do not spray disinfectant on outdoor playgrounds- it is not an efficient use of supplies and is not proven to reduce risk of COVID-19 to the public.
  - High touch surfaces made of plastic or metal, such as grab bars and railings should be cleaned routinely. The targeted use of disinfectants can be done effectively, efficiently, and safely on outdoor hard surfaces and objects frequently touched by multiple people; make sure disinfectant has thoroughly dried before allowing children to play.
  - Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.
  - Sidewalks and roads should not be disinfected. Spread of COVID-19 from these surfaces is very low and disinfection is not effective.
- Ensure [safe and correct use](#) and storage of cleaning and disinfection products, including storing products securely away from campers. Use products that meet EPA disinfection criteria.
- Cleaning products should not be used near campers, and staff should ensure that there is adequate ventilation when using these products to prevent children or themselves from inhaling toxic fumes.

### Shared Equipment/Items from Home

- Use of shared objects (e.g., gym or physical education equipment, art supplies, games) should be limited when possible, or cleaned between use.
- Items from home should ideally be stored in an individual storage space for each camper. When not practical, items from home shall be separated per their assigned small group and separate from other small groups.

### Prepare Your Campsite and Activity Space

Camps should prepare their physical space to prevent the spread of COVID-19 and encourage physical distancing, to the maximum extent possible.

- **Identify a location to safely isolate** individuals who develop symptoms during camp. Campers or staff members may become sick during camp hours. Identify a place where they can wait to be picked up.
- **Clean and disinfect frequently touched surfaces** within the camp and vehicles at least daily (for example, playground equipment, door handles, sink handles, drinking

fountains). Ensure safe and correct storage and application of disinfectants and keep products away from campers.

- **Create a plan for how to use shared equipment** (such as harnesses, paddles, PFDs). The best practice is to limit sharing of these materials. Where it is not possible to eliminate shared use:
  - Provide cleaning products (for example, alcohol spray or solution) where equipment is located.
  - Keep cleaning products with equipment as it moves around activity sites.
  - Ensure all staff and participants thoroughly wash or sanitize their hands before and after every use.
  - Ensure all parts of the equipment (including buckles, clips) are wiped down before and after use.
- **Rearrange seating to seat campers six feet apart** (when possible) and limit the number of campers sitting together.
- **Use touchless trash cans** to provide a hands-free way to dispose of tissues and contaminants if they are available.
- **Ensure all building type ventilation systems operate properly** and increase circulation of outdoor air as much as possible by opening windows and screen doors, using fans, or other methods. Do not open windows and doors if they pose a safety or health risk (e.g., allowing pollens in or exacerbating asthma symptoms) risk to campers using the camp.
- **Prepare your space to prevent spread and encourage physical distancing**, to the maximum extent possible. For example:
  - When possible divide large group spaces into manageable small areas to allow more campers to safely use the space.
  - Install physical barriers, such as sneeze guards and partitions, particularly in areas where it is difficult for individuals to remain at least six feet apart (e.g., reception desks).
  - Provide physical guides, such as tape on floors or sidewalks and signs on walls, to ensure that staff and campers remain at least six feet apart in lines and at other times (e.g., guides for creating “one-way routes” in hallways).
  - If common spaces are used, consider rotating the use of the space with cleaning and disinfecting between use.
- **Consider aquatic venues** and ensure you have modified layouts of seating areas and provided physical barriers and guides to promote social distancing. Remove shared items that are difficult to clean regularly.
  - Note: Cloth face masks should not be worn in or around pools, rivers, and lakes as they can become difficult to breathe through when wet. As a result, in the absence of any face masks to protect those around the wearer, it is of even greater importance to promote physical distancing of at least six feet both in and out of the water.

- Discourage activities, such as eating and drinking (on dry land), that require removal of cloth masks unless at least six feet (a few inches longer than a typical pool noodle, both in and out of the water) away from people they don't live with.
- Educate staff and patrons about arriving "swim" ready (for example, showering before going to the aquatic facility). Enforce this and other healthy swimming steps.
- The CDC has additional [guidance about public pools](#) that may be helpful to camps.
- **Plan your pick-up and drop off location** to minimize the potential spread of COVID-19. See more details about drop off and pick up in the *Practice Physical Distancing* section.
  
- **Food/Meal Service**
  - Expand the dining space or increase the number of dining spaces to allow diners to maintain physical distance. Physical distance and increased spacing is necessary.
  - If possible, offer multiple mealtimes in an expanded window to decrease the number of diners in the dining area at a time. Clean and disinfect the dining area between mealtimes.
  - Make stations available for diners to wash their hands with soap and water prior to eating. If handwashing stations are not available, station dispensers of alcohol-based hand sanitizer containing at least 60% alcohol at the entrance of the dining facility.
  - Prioritize, encourage, and make available outdoor seating areas.
  - Avoid buffet style, salad bars, self-service, table, counter food service, and other configurations that require diners to use shared utensils. Prioritize use of "grab-n-go" services (i.e., box meals), in which meals are packaged or assembled on a tray for diners to retrieve.
  - Cafeteria style where one kitchen staff person serves diners so serving utensils are not touched by multiple people is acceptable.
  - During family service, encourage counselor and/or staff (with clean/sanitized hands) to serve everyone from the tables serving dishes.
  - Use touchless trash cans to provide a hands-free way to dispose of meal waste.
  - Discontinue use of condiment dispensers. Offer condiment single use packets or small containers alongside of the prepared meal.
  - Discontinue use of common/shared use beverage dispensers is recommended.
  
- **Bathrooms**
  - See *Addendum: Residential Camp Guidelines* for additional guidelines.
  - Keep soap, toilet paper, and paper towels well stocked in the bathroom.

- Create a staggered bathing schedule and limit the number of people using the facilities at one time.
- Post the [Handwashing](#) sign from the CDC in the bathroom to remind campers and staff when and how to properly wash hands.
- See “Reinforce Best Practices to Promote Hygiene” within this document for cleaning frequency and cleaning supplies to clean bathrooms.
- Consider adding physical barriers, such as plastic barrier, between bathroom sinks, especially when they cannot be at least six feet apart.

## Practice Physical Distancing

### Maintain Consistent Groups

When creating a plan to safely operate during COVID-19, remember “less is best.” Limit group sizes, the number of staff members caring for a camper and the number of spaces a camper is in during the day as much as possible. We acknowledge that physical distancing can be challenging at camp. These best practices identify steps camps can take to help.

**Cohorting:** It is highly recommended that camps divide campers and staff into distinct groups, or cohorts, that stay together throughout an entire camp day. Camps should limit mixing between groups such that there is minimal or no interaction between cohorts. Between rotations disinfection of surfaces and handwashing should be performed.

Social distancing within small groups is strongly recommended but may not always be possible.

- Contact with external staff and contact between groups of campers should be limited. For example, playground time should be rotated between groups and specialist activity leaders (e.g., music, art) should be limited.
- When groups cross paths with each other or are sharing an area, adhering to strict hand hygiene and physical distancing is highly recommended.
- When physical distancing cannot be maintained while outside, it is highly recommended that face masks be worn. Face masks are required indoors.

**Residential Sleeping Accommodations** \* See *Addendum: Residential Camp Guidelines* for additional guidelines.

### Be Mindful When Using of Common Spaces

If common spaces are used, clean the space in between groups.

- Create smaller camper use areas when using large spaces to keep campers from gathering outside of their group.
- Stagger times for activities that require shared space or equipment, such as swimming, high adventure activities, or gym times.

### Camp Activities

When scheduling activities, consider activities that are a lower risk. Risk of COVID-19 spread increases the more people a camper or staff member interacts with, the closer and longer duration each physical interaction is, and the more sharing of objects or equipment used during

those interactions. More information about sport activities are outlined in [March 19 epidemic order](#) and [sports page](#).

**Note:** High Adventure Activities that require a third-party vendor inspection or permitting by the Bureau of Construction Codes, Ski-Amusement Division must have up-to-date inspections and permits to operate.

When selecting activities consider:

- Amount of necessary touching of shared equipment and gear (for example, protective gear, balls, bats, racquets, mats, or water bottles)
- Ability of participants to engage in social distancing
- Age of camper. Older youth might be better able to follow directions for social distancing and take other protective actions like not sharing water bottles.
- Size of the group

In all activities, camps should make modifications or implement procedures that mitigate the risk of COVID-19 spread. Use the following resources to assess and mitigate the risk of your typical programming:

- [Considerations for Youth Sports](#), from the CDC
- [Considerations for Aquatic Venues](#), from the CDC
- [Guidance for Administrators in Parks and Recreational Facilities](#), from the CDC
- [Field Guide for Camps for Implementing of CDC Guidance](#), Section 7.0 for more details.

### **Plan for Inclement Weather**

Camps operate most of their programming outside. Plan for rainy, hot, or inclement weather days and ensure you have strategies to socially distance in your indoor spaces. A camp's capacity should be limited by the available indoor space that can be occupied while maintaining adequate social distancing.

### **Field Trips/Traveling Groups**

Field trips/traveling groups to off-site natural environments are permitted with consideration of physical distancing and other mitigation measures.

### **Assess Drop Off and Pick-Up Times**

To minimize the potential spread of COVID-19, limit the number of individuals in your facility—at drop off, pick up, and throughout the day. Consider restructuring drop off and pick-up times to allow for maximum physical distancing.

- Set up hand hygiene stations at the entrance of your facility so campers and parents can clean their hands. Use soap and water or hand sanitizer with at least 60% alcohol if soap and water are not available. The hand sanitizer should remain out of the reach of young campers and be used under adult supervision.

- Stagger arrival and drop off times and plan to limit direct contact with parents to the extent possible. If possible, have staff meet campers at curbside, near the facility, and escort them to the camp staging area. These practices need to be balanced with the impact on a camper's transition time, the parent's work schedule, and the impact on instructional time.
- Limit the number of people dropping off or picking up a camper to one adult.
- Ask parents to avoid congregating in a single space or a large group.
- The CDC offers additional guidance for how to minimize potential spread of the virus during [pick up and drop off](#).

### **Limit Non-essential Visitors**

- Restrict the individuals in your facility or home as much as possible. Limit non-essential visitors, volunteers, and activities including groups of campers or adults.
- Licensing consultants are considered essential visitors.

### **Transportation**

Camps should continue to avoid non-essential travel for campers and staff. If travel is necessary:

- The Gatherings and Face Mask Order ([March 19, 2021](#)) issued by MDHHS requires that masks be worn by all staff and children ages 2 years and up while on a school bus or other transportation provided by the child care organization.
- Take the temperature of all campers and staff members as they enter the bus.
- Use hand sanitizer before entering the bus. Hand sanitizer must be supplied on the bus.
- The bus driver, staff, and all campers in grades preK-12, if medically feasible, must wear face masks while on the bus. Note: There may be situations where it is not safe for the bus driver to wear a face mask. Decisions about these situations should be made on a case-by-case basis with local public health officials.
- Clean and disinfect frequently touched surfaces in the transportation vehicle (e.g., surfaces in the driver's cockpit, hard seats, arm rests, door handles, seat belt buckles, light and air controls, doors and windows, and grab handles) before and after each route.
- Clean, sanitize, and disinfect equipment including items such as car seats, wheelchairs, walkers, and adaptive equipment being transported to camp daily.
- If a camper becomes sick during the day, they must not use group transportation to return home and must follow protocols outlined above. If a driver becomes sick during the day, they must follow protocols for sick staff outlined above and must not return to drive students.
- Weather permitting, keep doors and windows open when cleaning the vehicle and between trips to let the vehicles thoroughly air out.
- Weather permitting, consider keeping windows open while the vehicle is in motion to help reduce spread of the virus by increasing air circulation, if appropriate and safe.

## **Use Face Coverings and Appropriate Safety Equipment**

### **Required Face Coverings**

Wearing a cloth face mask indoors and outside when unable to physically distance from others is now mandated in Michigan per the Gatherings and Face Mask Order [March 19, 2021](#) issued by MDHHS. It is one of the most important ways to reduce transmission of COVID-19. The CDC provides [Guidance for K-12 School Administrators on the Use of Cloth Face Coverings in Schools](#) that provide practical recommendations for camps to implement the requirements.

### When and Where to Wear a Cloth Face Covering in Your Site

Environment	Staff	Young Campers Ages 2-3	Campers Ages 4	Campers Ages 5 and up	Parents and visitors
Cabins and classrooms	Required	Should be encouraged*	Should be encouraged*	Required	Required
Indoor activity and common spaces	Required	Should be encouraged*	Required	Required	Required
Outside with social distancing	Not required	Not required	Not required	Not required	Not required
Transportation	Required	Required	Required	Required	Required

\* Although cloth face coverings are not required in these settings, they should be encouraged if tolerated.

### Exceptions

- **Age:** Face coverings should never be placed on young children under age 2.
- **Medical condition:** Anyone who cannot medically tolerate a mask, has trouble breathing, or is unable to remove the face covering without assistance should not wear a face covering.
  - Camps with staff that claim the medical exemption to wearing a face mask should view [MIOSHA guidance](#) on this topic and contact MIOSHA's COVID-19 hotline with any questions: 855-SAFEC19 (855-723-3219)."
- **Eating and drinking:** Cloth face masks may be removed while eating and drinking.
- **Sleeping:** Campers and staff should not wear masks while sleeping.
- **Activity:** Face coverings are not required during some activities:
  - **Swimming:** People should not wear cloth face coverings while engaged in activities that may cause the cloth face covering to become wet, like when [swimming at the beach or pool](#). A wet cloth face covering may make it difficult to breathe. For activities like swimming, it is particularly important to maintain physical distance from others when in the water.
  - **Outdoor activity** and able to consistently maintain six feet distance from others.
  - **When communicating with someone who is deaf**, deafblind, or hard of hearing and whose ability to see the mouth is essential to communication.

### Face Shields

Plastic face shields are not a replacement for cloth face coverings but may be used in *conjunction* with cloth face coverings in any of the above settings. In settings in which cloth face coverings are *not required*, plastic face shields may be worn alone, and may offer some degree of risk mitigation.

Per the [CDC](#), if face shields are used without a face covering, they should wrap around the sides of the wearer’s face and extend to below the chin. Disposable face shields should only be worn for a single use. Reusable face shields should be cleaned and disinfected after each use. Plastic face shields for newborns and infants are NOT recommended.

### **Wearing and Sanitizing Face Coverings Appropriately**

The [CDC](#) provides more guidance for how to properly wear and sanitize a cloth face covering.

### **Social Emotional Health While Wearing Face Coverings**

Camp administrators, directors, and staff may need to use strategies to prepare campers (especially young children) for seeing camp staff in masks and attend to emotional responses to this new normal. One option is for staff to share a picture of themselves with and without the mask in advance of a camper’s return to camp. Another option is to use pediatric appropriate masks (for example, with child friendly designs or characters) made by community members who will donate them or produce them at an affordable price for providers. The [American Academy of Pediatrics](#) provides tips for how to help children be more comfortable wearing cloth face coverings.

### **Gloves**

It is recommended that camp staff wear gloves in a manner consistent with existing licensing rules (for example, gloves should be worn when handling contaminants, cleaning, or when serving food). Staff members should wash hands before putting gloves on and immediately after gloves are removed. Gloves are not recommended for broader use.

### **Additional Resources**

- [CDC Guidance for Camps COVID-19](#)
- [CDC Suggestions for Youth and Summer Camps](#)
- American Academy of Pediatrics, [COVID-19 Resources](#)
- [American Academy of Pediatrics, Improving Health and Safety at Camp](#)
- American Camp Association [COVID-19—Resource Center for Camps](#)
- Association of Camp Nurses [Coronavirus COVID-19 Consideration for Camps](#)
- [MIOSHA COVID-19 Workplace Safety Guidance](#)
- [COVID-19: Stakeholder Call Camps and Youth Programs](#)

## ADDENDUM: Residential Camp Operating Guidelines

In addition to the above guidance, the following guidelines are specific to residential camps.

### Monitoring (Pre-Screening) for COVID-19

#### Pre-Arrival Screening

There are two strategies residential, troop, and travel camps should implement to ensure campers and staff arrive healthy.

- **Get tested.** Camps are encouraged to require campers and staff to get tested to assure that they have had a negative diagnostic test for COVID-19 completed within the last three to five days.
  - Before arriving, campers and staff 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 and staff members 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.
- **Symptom Log.** Campers and staff members have a key role to play in limiting the spread of COVID-19 before arriving on site. Camps should remind campers and staff to:
  - Take and record their temperature daily between getting tested and arriving at camp.
  - Monitor their symptoms (fever of 100.4 °F or greater, new onset of a cough, new onset of shortness of breath, diarrhea, fatigue, headache, muscle or body aches, congestion or runny nose, nausea, loss of taste or smell, sore throat, vomiting, etc.) in the time between getting tested and arriving at camp.
    - The [MI Symptoms app](#) is a good tool to track symptoms and is free for use in Michigan.
    - If campers or staff develop symptoms, they should not be allowed to attend camp, and they may need to repeat testing.
  - Self-quarantine, to the extent possible. Campers and staff should strive to limit the number of people they meet. It is especially important to avoid contact with individuals who have been diagnosed with, tested for, or quarantined because of COVID-19. An ideal scenario, which may not be possible for all campers, is to self-quarantine for 14 days prior to coming to camp.

**Note:** The pre-arrival screening process does not replace the requirements for health screening upon arrival and continued monitoring of campers and staff.

## Preparing Campsite and Activity Space

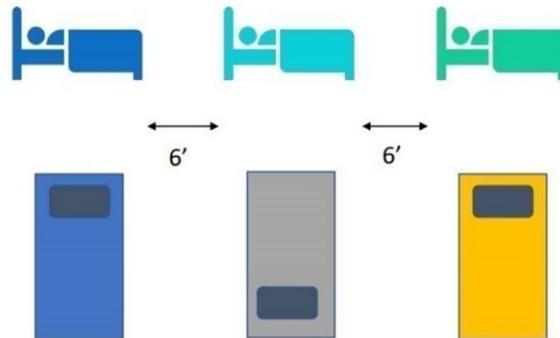
### Bathrooms

- Avoid sharing common bathroom supplies (towels, soap, toothpaste, etc.). Instruct campers to bring their own bathroom supplies and a container for toiletries to be stored in for the duration of camp (for example, a bathroom tote or a 1-quart clear plastic bag labeled with their name).
- Campers should keep personal items in their bag or tote and store their bag or tote in a designated area.
- Encourage staff and campers to avoid placing toothbrushes or toiletries directly on counter surfaces.

## Practice Physical Distancing

### Sleeping Accommodations

- Camps should create at least six feet of space between beds and occupants alternated head-to-toe orientation. If this is not possible, see next bullet.



- Consider installing physical barriers which meet interior finish requirements of R 400.11209 between beds, especially when the bunk/bed/cot, etc. cannot be at least six feet apart. Physical barriers must not block egress. Lower and higher beds of a bunk have separation barrier by design.
- Implementation of handwashing measures should be contemplated for the sleeping accommodation area. If handwashing facilities are not immediately available, use of hand sanitizer stations is acceptable.
- Sleeping accommodations should be cleaned and sanitized daily consistent with common space cleaning practice.
- Campers should keep personal belongings organized and separate from other campers' belongings. Tent, yurt, and hybrid structures capacity is contingent upon physical distancing recommendations.