Phase Two Guidance


During Phase Two, daytime Summer Camps may begin services (overnight camps remain prohibited). Summer camps should implement the following measures in order to help reduce the risk of COVID-19 transmission among participants and staff. For additional information, see coronavirus.dc.gov/phasetwo

Implement Measures to Support Safety of Staff and Campers

Enrollment and Daily Health Screening
- Summer camps should limit hiring staff and enrolling staffers to those who are from the National Capitol Region, or a region with low community spread of COVID-19.
- Summer Camps should ensure a daily health screen for all campers and staff before participation. An individual with any of the following symptoms should not enter the Summer Camp, and instead they should go home and call their healthcare provider:
  - Fever (subjective or 100.4 degrees Fahrenheit) or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion, nausea or vomiting, diarrhea, or otherwise feeling unwell.
  - For Screening Tool Guidance, visit coronavirus.dc.gov/healthguidance
- If a camper or staff member develops any of the symptoms above during the course of the day, the Summer Camp should have a process in place that allows them to isolate until it is safe to go home and seek healthcare provider guidance.

Encourage Healthy Practices
- Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissue) to support healthy hygiene practices.
- Ensure handwashing strategies include washing with soap and water for at least 20 seconds. If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Perform frequent hand hygiene (with soap and water or alcohol-based hand sanitizer).
  - Key times to perform hand hygiene include:
    - Before eating food,
    - After using the toilet,
    - Before and after putting on, touching, or removing cloth face coverings or touching your face,
    - After blowing your nose, coughing, or sneezing,
    - After playing outdoors at a playground or with children from other households.

High-Risk Individuals
Summer Camps should ensure that children and staff at increased risk for experiencing severe illness due to COVID-19 consult with their medical provider before participating in Summer Camp.
- People with the following conditions are at increased risk of severe illness from COVID-19:
  - Chronic kidney disease
  - COPD
  - Immunocompromised conditions
  - Obesity (Body Mass Index of 30 or higher)
  - Serious heart conditions
  - Sickle cell disease
Type 2 diabetes mellitus

For a complete list of conditions which might be at an increased risk for severe illness from COVID-19, please see [cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html](http://cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html)

Any staff member or parent of a child who has a medical condition not listed, but who is concerned about their safety, should also consult with their medical provider before participating in Summer Camp

Preventing a Vaccine-Preventable Disease Outbreak

According to the Centers for Disease Control and Prevention (CDC) and DC Health data, the COVID-19 pandemic has resulted in a significant reduction in childhood vaccine administrations across the country including the District of Columbia and Maryland.

In order to prevent a vaccine preventable disease outbreak in a childcare setting, it is imperative for all children who attend childcare be **fully vaccinated** according to CDC and DC Health standards.

- A review of immunization schedules can be found [here](http://coronavirus.dc.gov/healthguidance).
- CDC has other resources regarding [Vaccine-Preventable Diseases](http://coronavirus.dc.gov/healthguidance).

Implement Controls to Limit Contact

**Non-Medical Face Coverings and Face Masks**

- All adults must wear a mask or face coverings or face masks at all times while participating in camp-related activities. If an adult has a contraindication to wearing a face covering, either medical or otherwise, then it is recommended that the individual should not participate in camp-related activities.
- Campers ages three years and older old must wear face coverings. Medical, developmental, and psychological reasons may limit the ability for some campers to wear face coverings. Older children and adolescents may have less difficulty wearing a face covering compared to younger children.
- Face masks may be not feasible to wear during certain indoor and outdoor activities. In these instances, it is important to ensure at least 6 feet distance between persons when they are unable to wear a face mask.
- Masks are not required for children aged 2 years or younger.

For more information about non-medical face coverings or face masks, please refer to the guidance “Guidance about Masks and Other Face Coverings for the General Public” on [coronavirus.dc.gov/healthguidance](http://coronavirus.dc.gov/healthguidance)

Social Distancing

Summer Camps should ensure appropriate physical distancing by having:

- No more than 12 individuals (staff and children) clustered in one group.
  - For indoor activities, this means 12 people in one room. Masks must be worn during indoor activities.
  - For outdoor activities, each group of 12 should interact with their own group and not mix between other groups. Each group of 13 should have extra social distance (>6 ft) between them and the next group of 12. Except during certain vigorous physical activities, masks or cloth face coverings should be worn while outdoors.
  - One additional staff (13 total individuals) can be briefly added to the class if it is necessary to support individual student needs.
- Six feet of distance between each individual,
• Grouping the same campers and staff together each day and throughout the day (as opposed to rotating staff or children),
• No mixing between groups to include entry and exit of the building, at meal time, in the rest room, on the playground, in the hallway, and other shared spaces,
• No large group activities and activities requiring children to sit or stand in close proximity,
• Staggered drop-off and pick-up times or another protocol that avoids large groups congregating and limits direct contact with parents,
• Curb- or door-side drop-off and pick-up of children, and
• Limiting non-essential visitors.

Meals
• Food at camps is strongly encouraged to be provided as pre-packaged boxes or bags for each attendee.
• Campers should eat in separate areas or with their smaller group, instead of in a communal dining hall or cafeteria. Stagger lunch by groups and/or assign lunch and recess area by group.
• Campers should be spaced 6-feet apart within these groups.
• Use disposable food service items (utensils, dishes).
• If disposable items are not feasible or desirable, ensure that all non-disposable food service items are handled with gloves and washed with dish soap and hot water or in a dishwasher. Individuals should wash their hands after removing their gloves or after directly handling used food service items.
• Avoid sharing of foods, utensils, and other personal items.

Equipment and Belongings
• Discourage sharing of items that are difficult to clean, sanitize, or disinfect.
• Avoid sharing electronic devices, toys, books, and other games or learning aids.
• Keep each camper’s belongings separated from others’ and in individually labeled containers, cubbies, or areas.
• Ensure adequate supplies to minimize sharing of high-touch materials to the extent possible (e.g., assign art supplies or other equipment to a single camper), or limit use of supplies and equipment to one group of campers at a time and clean and disinfect between use.

Establish a Plan for COVID-19 Exposure
• If any child or staff member has been in close contact with a person who is positive for COVID-19, then the child or staff member must not attend the Summer Camp until assessed by their healthcare provider, or have completed their quarantine period without becoming symptomatic or diagnosed with COVID-19.
• Any child or staff member who is awaiting a COVID-19 test result should not attend the Summer Camp until their result comes back negative.
• In the event that a summer camp identifies a child or staff member who has tested positive for COVID-19, it is important for the summer camp to establish a plan for COVID-19 exposures.
• Identify a point of contact that an employee can notify if they test positive for COVID-19 and choose to disclose this information.
• Staff or students diagnosed with COVID-19 should not participate in summer camp until they have been cleared from isolation.
• Implement leave policies that are flexible and non-punitive, and that allow sick employees to stay home. Leave policies are recommended to account for the following:
  o Employees who report COVID-19 symptoms,
  o Employees who were tested for COVID-19 and test results are pending,
  o Employees who are a close contact of someone who tested positive for COVID-19,
  o Employees who tested positive for COVID-19,
  o Employees who need to stay home with their children if there are school or childcare closures, or to care for sick family members.

• Keep abreast of current law, which has amended both the DC Family and Medical Leave Act and the DC Sick and Safe Leave Law and created whole new categories of leave, like Declared Emergency Leave.

• Learn about and inform your employees about COVID-related leave provided through new federal law, the Families First Coronavirus Response Act (FFCRA) and all applicable District law relating to sick leave.

• If an employee chooses to report to the Summer Camp that they are positive for COVID-19, the Summer Camp should have a notification process to share the following with staff and parents:
  o Referral to the Guidance for Contacts of a Person Confirmed to have COVID-19, available at https://coronavirus.dc.gov

• Establishments should notify DC Health when:
  o An employee notifies the camp they tested positive for COVID-19 (not before results come back)
    AND
  o the employee interacts frequently with campers
  OR
  o if a parent or camper notifies the camp that a camper tested positive for COVID-19 (not before test results come back)

• Notify DC Health by submitting an online form on our website: https://dchealth.dc.gov/page/covid-19-reporting-requirements under the section “Non-healthcare Facility Establishment Reporting a Case in an Employee, Patron, or Visitor”.
  o Select “Non-healthcare facility establishment seeking guidance about an employee, patron, or visitor that reported testing positive for COVID-19 (epidemiology consult/guidance).”

• DC Health will instruct Summer Camps on dismissals and other safety precautions in the event a known COVID-19 individual came in close contact with others at Summer Camp.

Cleaning and Disinfecting
All Summer Camps should regularly clean, disinfect and sanitize surfaces, and materials per District guidance on cleaning and disinfecting.

• Emphasis must be placed on regular cleaning and disinfection of high-touch surfaces, including but not limited to door handles, chairs, light switches, elevator buttons, toilets, and faucets.

• Toys, including those used indoors and outdoors, must be frequently cleaned and sanitized throughout the day.
  o Toys that have been in children’s mouths or soiled by bodily secretions must be immediately set aside. These toys must be cleaned and sanitized by a staff member wearing gloves, before being used by another child.

• For all cleaning, sanitizing, and disinfecting products, follow the manufacturer’s
instructions for concentration, application method, contact time, and drying time prior to use by a child. See CDC’s guidance for safe and correct application of disinfectants.

- Providers must place signage in every classroom reminding staff of cleaning protocols.

Building Considerations
Summer Camps that are using a facility that is reopening after a prolonged facility shutdown should ensure all ventilation and water systems and features (e.g. sink faucets, drinking fountains, decorative fountains) are safe to use as follows:

- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible, for example by opening windows and doors. Increase in air circulation should be continued after reopening where safe and possible. Do not open windows and doors if doing so poses a safety or health risk (e.g., risk of falling, triggering asthma symptoms) to children using the facility.

- Flush water systems to clear out stagnant water and replace it with fresh water. This will remove any metals (e.g. lead) that may have leached into the water and minimize the risk of Legionnaires’ disease and other diseases associated with water.

Further details on steps for this process can be found on the CDC website at https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html.