

# COVID-19: SMDHU OUTBREAK GUIDANCE FOR RECREATIONAL (OVERNIGHT) CAMPS

Last revised: August 17, 2021

This document provides additional direction related to COVID-19 case, contact and outbreak management to reduce the risk of introducing and spreading COVID-19 in recreational (overnight) camps and it should be used in conjunction with guidance provided in the Ministry of Health's [COVID-19 Safety Guidelines for: Overnight Camps \(revised August 12, 2021\)](#).

Each recreational camp should conduct a risk assessment which is a systematic approach to assessing the efficacy of control measures that are in place to mitigate the transmission of COVID-19 in your setting.

## TESTING EXPECTATIONS

- Ill individuals are recommended for COVID-19 testing.
- Medical directives are in place, with consent from parents/guardians on file (as applicable), to facilitate camp testing.
- Requisitions are on file for each camper and staff with demographic and health card information already completed to facilitate camp testing.
- Master list of all staff and campers with demographic information, parent/guardian information and health card information are on file and easily accessible in hard copy to facilitate camp testing.
- If an ill individual is considered a probable/confirmed case of COVID-19, their cohort will be deemed high-risk contacts (HRCs) and recommended for testing.
- SMDHU will not be able to provide COVID-19 specimen collection kits, regardless of outbreak, to the camp.
  - The camp should ensure they have the required testing kits on hand to test symptomatic staff and campers.
- SMDHU may support, in collaboration with regional partners, a one-time outbreak response testing initiative but testing of individuals outside of a confirmed outbreak will be the responsibility of the camp.
- More information and testing resources are available on our [Health Professionals Portal](#).

## RAPID ANTIGEN TESTING (RAT)

- Examples: Panbio™, BD Veritor™
- RAT is not supported for diagnosis of COVID-19 infection.
- RAT is not supported for use on symptomatic individuals.
- RAT is not supported for use on asymptomatic individuals who are high-risk contacts or during outbreak investigations.
- If SARS-COV-2 is detected on RAT it is **considered a probable COVID-19 case** and must be confirmed by polymerase chain reaction(PCR ) testing
  - Reporting of positive RAT results to SMDHU is recommended.

## RAPID MOLECULAR TESTING (RMT)

- Examples: ID Now™, GeneXpert®
- RMT is supported for use on symptomatic individuals at camp.
  - If SARS-COV-2 is detected on RMT it is **considered a confirmed COVID-19 case** and must be reported to SMDHU immediately.
  - **Note:** If SARS-COV-2 is detected on RMT, **a second sample** should be submitted for laboratory screening of variants of concern. This can be submitted alongside other lab-based PCR tests done for high-risk contacts. See [algorithm](#).

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- RMT is not supported for individuals (symptomatic or asymptomatic) who are high-risk contacts of confirmed cases or during outbreak investigations.
- RMT will not be supported to “rule out” infection in high-risk contacts or outbreak investigations.

## LABORATORY-BASED PCR TESTING

It is expected that recreational camps will have the ability to obtain lab-based PCR testing in the following situations:

- Symptomatic staff and campers who are high-risk contacts and/or during an outbreak.
- Asymptomatic testing of high-risk contacts at the following frequency:
  - 1<sup>st</sup> test – as soon as possible after awareness of exposure to confirmed/probable COVID-19 case; and
  - 2<sup>nd</sup> test – on or after day 10 of self-isolation (in the rare event individual is still at camp).
    - If the first test did not occur until on or after day 7 of self-isolation, day 10 testing is not required.
- Outbreak investigations where all campers and staff (symptomatic or asymptomatic) are asked to be tested.

## POINT-OF-CARE TESTING KIT DISPOSAL CONSIDERATIONS

- Point of Care testing products must be disposed as [biomedical waste](#) in Ontario, except for the box and paper instruction which can be placed in the general recycling or waste stream.
- Liquids, swabs, their containers, and all items used in testing are considered biomedical wastes. They must be kept separately from all other wastes on the premises and not be disposed of in the regular garbage.
- The waste should be stored in an appropriate sealed biohazard container that is designed to prevent leaks and spills. It should be stored indoors in a well-ventilated area and not around areas used for food preparation or consumption.
- The waste should be collected and removed at regular intervals.
- If the waste is not collected from the test site by an authorized hazardous waste hauler, it should be transported as directly as possible to a disposal site or storage facility in Ontario and without overnight storage in a vehicle.
- All applicable requirements related to health and safety such as those in the [Occupational Health and Safety Act](#) and its regulations continue to apply.

## MANAGEMENT OF ILL CAMPERS/STAFF

Ill individuals need to be assessed by a health care provider. Given the vague symptoms that can present with COVID-19, particularly in children, all individuals are encouraged to be tested if they have any compatible signs or symptoms.

Campers and staff who start to show symptoms of COVID-19 must be promptly separated from others, into a designated area away from others, while waiting for assessment and/or test results.

- When an individual develops symptoms, their cohort must immediately self-isolate until test results are known or alternate diagnosis given.
- Symptomatic campers/staff should be asked to wear a medical mask (if tolerated).
- Those with suspect COVID-19 should be isolated away from other campers/staff with non-COVID-19 symptoms who are in the medical centre.
- Staff providing care for symptomatic individuals, suspect/confirmed COVID-19 cases (even if individual has no symptoms) or high-risk contacts need to utilize [droplet/contact precautions](#).
- Thermometers must not be used between individuals without single-use protective covers and/or disinfection between uses.

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If the health care provider makes an alternative diagnosis and determines that the condition is not COVID-19, the individual can return to the camp; however, ill individuals considered not infectious for COVID-19 should remain isolated away from others until their symptoms have been improving for 24 hours.

## MANAGEMENT OF PROBABLE/CONFIRMED COVID-19 CASES

**Probable and confirmed cases of COVID-19 cannot self-isolate at camp, including staff cases.**

There should be protocols in place to notify parents/guardians if their child tests positive for COVID-19 while at camp, including the **need for immediate pick up**. Consideration should be given for offsite staff accommodations and supports if staff cannot easily return home for their period of self-isolation.

- While awaiting pick-up, individuals must be in a private room under [droplet/contact precautions](#) in a designated area of the camp.
  - Campers/staff should not be in a common/multi-use area, even with physical barriers in place.
- Dedicated staff should be assigned to care for those in self-isolation and be educated in application of [droplet/contact precautions](#).
- There should be separate staff for those caring for individuals self-isolating as cases vs. those self-isolating as contacts.
- Once the individual has left camp, the room(s) where any suspect/confirmed case was in attendance requires an intensive [clean/disinfection](#) of all items and surfaces (including steam-cleaning of any cloth-based furniture/carpets if applicable).

## MANAGEMENT OF HIGH-RISK CONTACTS

**High-risk contacts of probable and confirmed cases of COVID-19 should not self-isolate at camp, including staff contacts.**

There should be protocols in place to notify parents/guardians if their child is a high-risk contact (HRC), including the **need for immediate pick up**. Consideration should be given for offsite staff accommodations and supports if staff cannot easily return home for their period of self-isolation.

- HRCs should be offered testing as soon as possible.
  - If testing of HRCs occurs offsite, HRCs cannot travel together to testing location and must be taken individually with staff wearing appropriate personal protective equipment.
- While awaiting pick-up, individuals should be in a private room under [droplet/contact precautions](#) in a designated area of the camp
  - HRCs should not be in a common/multi-use area, even with physical barriers in place.
  - HRCs cannot share a room until departure from camp.
- Dedicated staff should be assigned to care for those in self-isolation and be educated in application of [droplet/contact precautions](#).
- There should be separate staff for those caring for individuals self-isolating as cases vs. those self-isolating as contacts.
- Once the individual has left camp, the room(s) the HRC was in attendance requires an intensive [clean/disinfection](#) of all items and surfaces (including steam-cleaning of any cloth-based furniture/carpets if applicable).

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- HRCs cannot return to the camp until:
  - 14 days past their last exposure to the case **and** they have a negative lab-based PCR test taken on or after day 10 of self-isolation; or
  - 24 days past their last exposure to the case in the event the individual did not get tested.
- No excluded campers /staff will be allowed to attend if at 14 days they are symptomatic.

## COVID-19 OUTBREAK MANAGEMENT

### Definitions

- Enhanced Surveillance Definition: One (1) lab-confirmed case of COVID-19 in a camper or staff in a camp where the case was onsite at the camp during their infectious period.
- Outbreak Definition: Two (2) or more lab-confirmed cases of COVID-19 in campers and/or staff (or other visitors) in a camp with an epidemiological link, within a 14-day period, where at least one case could have reasonably acquired their infection in the camp.

**Note:** SMDHU may consider closing the camp if campers and/or staff in two or more cohorts test positive for COVID-19 and could have reasonably acquired their infection at camp.

## OUTBREAK CONTROL MEASURES

When an outbreak is confirmed in the camp, the following **additional control measures** will be expected to be put into place immediately:

### COMMUNICATION

- Line lists maintained, as follows:
  - Separate lists for staff and campers provided to SMDHU daily.
  - Additional cases to be added as applicable (cases that did not attend the camp during their infectious period are still to be added to the line list).
- Camp must identify an outbreak lead for the purposes of communication with SMDHU.
  - If lead is off, a backup staff must be identified to ensure consistent communication.
- Communication to the camp's families/staff regarding the outbreak should be reviewed by SMDHU prior to being sent.
- If any staff test positive for COVID-19, the camp has notification requirements to Ministry of Labour, Training and Skills Development (MLTSD), Workplace Safety and Insurance Board (WSIB), Unions, and Joint Health and Safety.

### COHORTING

- **All** established cohorts at the camp must use public health measures (e.g., masking, physical distancing) when interacting with each other for the duration of the outbreak.
  - Individuals *within* an established cohort do not need to use public health measures when only interacting with others in that cohort unless someone in the cohort has symptoms (and is awaiting testing) or the cohort has been deemed high-risk contacts.
- Staff assigned to an established camper cohort must remain with the camper cohort and not mix with other staff cohorts.
  - This includes sleeping and dining with the camper cohort
  - Staff who are on days off should refrain from leaving camp during the outbreak and must use public health measures (e.g., masking, physical distancing) when not with their established camper cohort
- Dedicated staff should be assigned to care for those in self-isolation.

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## ADMISSIONS/ACTIVITIES DURING AN OUTBREAK

- New individuals/cohorts should be delayed until outbreak is over unless approved by SMDHU.
- Wilderness expeditions, field trips, and exchange trips must be delayed until outbreak is over, unless departure already occurred prior to outbreak.
- Any sensory/food activities should be cancelled unless reviewed with SMDHU.
- All activities should be outdoors (weather permitting).
- Singing, playing of wind/brass instruments and/or heavy exertion physical activities should be deferred until the outbreak is over.
- Essential visitors should be rescheduled, if possible.

## EDUCATION

- Post signage indicating outbreak.
- Increase [education](#) to staff responsible for caring for campers/staff about applying [droplet/contact precautions](#).
  - Information should be [multilingual](#) if needed.
- Increase education to entire camp community regarding outbreak control measures including self-monitoring for signs and symptoms and reporting any symptoms to staff.

## ENVIRONMENTAL CLEANING & LAUNDRY

- Frequency of [cleaning/disinfection](#) of high-touch surfaces should be increased beyond twice daily in outbreak situation.
- Items that are challenging to clean (e.g., wood-based objects, craft supplies, aquatic foam materials) should not be used during the outbreak.
- Use only [disinfectants](#) that have a Drug Identification Number (DIN). A DIN is an 8-digit number given by Health Canada that confirms it is approved for use in Canada.
- All sports/activity equipment to be cleaned and disinfected at higher frequencies.
- Continue with recommended cleaning/disinfection practices in non-affected rooms/common areas.
- Laundering of linens, towels, personal clothing/toys and non-medical masks/face coverings should be increased during an outbreak.
  - High-temperature washing and drying is recommended
  - Personal protective equipment should be used by staff if laundering campers' personal belongings, face coverings etc.

## RELATED RESOURCES

- [SMDHU Class Section 22 Order – Self Isolation](#)
- [Camper screening tool](#)
- [Employee/visitor screening tool](#)

Upon outbreak declaration, SMDHU staff will visit the camp to conduct an infection prevention and control assessment and provide direction as needed.

**Please contact the Simcoe Muskoka District Health Unit if you have any questions at 1-877-721-7520 ext. 8809.**

**Monday to Friday 8:30 a.m. to 4:30 p.m.**

**For urgent consultations or to report a suspect/confirmed COVID-19 case after-hours, please contact 1-888-225-7851.**

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