Recent updates include incorporating the Centers for Disease Control and Prevention’s (CDC) new guidance on when to wear masks based on the new COVID-19 community levels.

- Effective Feb. 25, 2022, CDC is exercising its enforcement discretion to not require that people wear masks on buses or vans operated by public or private school systems, including early care and education/child care programs.
- Each program is encouraged to review the CDC’s transportation order guidance and to consult with legal counsel as necessary to determine whether they meet this enforcement discretion criteria.
- For more information, visit CDC: Requirement for Face Masks on Public Transportation Conveyances and at Transportation Hubs (www.cdc.gov/coronavirus/2019-ncov/travelers/face-masks-public-transportation.html).

Both the Minnesota Department of Health (MDH) and CDC strongly recommend consistent use of layered mitigation strategies to help limit the spread of COVID-19 among children, youth participants, staff, and members of their households. These strategies include indoor masking; adequate ventilation; handwashing and respiratory etiquette; staying home when sick and getting tested; contact tracing in combination with quarantine and isolation; and cleaning and disinfection.

MDH recommends program and camp administrators review CDC: Schools, Child Care, and Colleges (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html) for additional mitigation strategies and toolkits specific to their setting.

Requirements under Minnesota law

Minnesota Rules, part 4605.7070, requires any person in charge of any institution, school, child care facility, or camp to report cases of COVID-19 to MDH.

- Minnesota Rules, part 4605.7070 (www.revisor.mn.gov/rules/4605.7070/)
COVID-19 PREVENTION GUIDANCE FOR YOUTH PROGRAMS & DAY/OVERNIGHT CAMPS

- Reportable Diseases A-Z: Reportable Infectious Diseases (www.health.state.mn.us/diseases/reportable/disease.html)
- To report a case of COVID-19: COVID-19 Case Report Form for K-12 Schools, Childcares, and Youth Programming (Camps, Sports, Extracurricular Activities) (redcap.health.state.mn.us/redcap/surveys/?s=AD9CT3P3NNFY4A4E)

**Recommendations to reduce transmission of COVID-19**

Each facility and program should consider the following:

- Encourage vaccine-eligible staff, volunteers, campers, and family members to be up to date with COVID-19 vaccinations prior to attending camp. To find the most current information on vaccination and what it means to be up to date, visit CDC: Stay Up to Date with Your COVID-19 Vaccines (www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html)
- Communicate with families prior to and throughout sessions to set expectations for program participation, including following current mitigation strategies and attendance requirements related to illness, symptoms, exposure, and quarantine.
- Review sick and absentee policies to ensure they are supportive of participants staying home when sick or when in quarantine due to an exposure.
- Consider ways to accommodate the needs of staff, volunteers, children, and families at risk for serious illness from COVID-19.
- Outdoor activities are strongly recommended whenever feasible.

**Masking**

CDC recommends people and communities use COVID-19 community levels to support decisions about masking based on their local context and unique needs. To measure the level of community risk, COVID-19 community levels rely on multiple data sources, including new COVID-19 hospital admissions per 100,000 people in the past seven days, the percent of staffed inpatient beds occupied by COVID-19 patients, and total new COVID-19 cases per 100,000 people in the past seven days. Using that data, community level is classified at the county level as low, medium, or high and updated on a weekly basis. For more information on COVID-19 community levels, visit CDC: COVID-19 Community Levels (www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html).

In all counties at the high-risk COVID-19 community level, universal indoor masking is recommended, regardless of vaccination status. In counties at medium-risk, a mask should be worn indoors by people participating in youth programs and camps who are immunocompromised or more likely to develop severe disease, or people who have contact with a person who is immunocompromised or more likely to develop severe disease.

At all COVID-19 community levels (refer to CDC: COVID-19 by County (www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html):
Program leadership may choose to implement masking, as appropriate, and are strongly encouraged to consider masking as a measure to address cases or outbreaks in the facility.

People may also choose to wear a mask based on personal preference or personal level of risk.

People with symptoms, a positive test, or exposure to someone with COVID-19 should wear a mask when recommended by isolation and quarantine guidance, regardless of current COVID-19 community levels. Refer to the health screening, isolation, and quarantine section of this document for more information.


**Physical distancing and cohorts**

Maintaining physical distance means keeping space, both indoors and outdoors, of at least 6 feet (about 2 arm lengths) between people who are not in the same household. This practice provides protection by reducing risk of exposure and limiting the number of close contacts when someone is infected with COVID-19. In general, CDC recommends people who are not up to date on their COVID-19 vaccines to practice physical distancing, especially if they are at higher risk of getting very sick with COVID-19.

Placing people in cohorts can be used to limit contact between participants, staff, and others. Cohorts help to keep people together in a small group and to have each group stay together throughout the entire day. Using cohorts should not replace the use of other layered prevention measures within each group. Each facility and program should:

- Consider dividing participants into small groups that stay together as much as possible throughout the day and from day to day, particularly among age groups not currently eligible for vaccination.
- Limit unnecessary mixing between cohorts as much as possible. When mixing cohorts cannot be avoided, maximize other prevention measures (e.g., physical distancing between cohort groups) to the extent feasible.
- Assign program staff to one cohort when feasible.

**Mealtimes**

To reduce the transmission of COVID-19 during mealtimes each facility and program should:

- Prioritize outdoor dining whenever possible.
- For indoor dining, increase airflow and ventilation within the space as much as possible.
- Reduce crowding by staggering mealtimes to minimize the number of people dining together at one time.
- Maintain physical distance as much as possible between groups that are eating or drinking.
- Establish routines for all staff, volunteers, and participants that include washing their hands or using hand sanitizer before and after serving or eating.
Ventilation

Improving ventilation is an important COVID-19 prevention strategy that can reduce the number of virus particles in the air. Along with other preventive strategies, protective ventilation practices can reduce the airborne concentration of particles that spread COVID-19. Camps should strongly consider evaluating their ventilation systems, with the goal of maximizing ventilation throughout indoor spaces.

For more specific information about maintenance and use of ventilation equipment and other ventilation considerations, refer to:


Cleaning, disinfection, and hygiene practices

The virus that causes COVID-19 is spread mainly by respiratory droplets. Regular hand washing or the use of hand sanitizer continues to be the best practice to prevent the transmission of illness.

- Provide communication, materials, and training to ensure that staff, volunteers, and participants:
  - Wash their hands often with soap and water for at least 20 seconds, especially after having been in a public place or after blowing their nose, coughing, or sneezing. If soap and water are not available, use a hand sanitizer that contains at least 60% alcohol.
  - Always cover their mouth and nose with a tissue when they cough or sneeze. Those that do not have a tissue should cough or sneeze into their arm or elbow.
  - Ensure the availability of appropriate supplies to support healthy hygiene behaviors (e.g., soap, hand sanitizer, paper towels, disinfectant wipes, and tissues) and strategically place supplies in areas where they will be used frequently.

Programs should review the following resources:

- [CDC: Cleaning and Disinfecting Your Facility](www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html)
- [Hand Hygiene](www.health.state.mn.us/people/handhygiene/index.html)
- [Cover Your Cough](www.health.state.mn.us/people/cyc/index.html)

Health screening, isolation, and quarantine

Staff, participants, families, visitors, and others should be vigilant in monitoring for symptoms of illness and should stay home when they are feeling ill. Educate staff, participants, and families about the signs and
Symptoms of COVID-19 and the program’s attendance policies. It is important to follow COVID-19 isolation and quarantine guidance.

- Staff and participants, regardless of vaccination status, should stay home if they have tested positive for COVID-19, have symptoms of COVID-19, or are ill and waiting for a COVID-19 test result. Review If You Are Sick or Test Positive: COVID-19 (www.health.state.mn.us/diseases/coronavirus/sick.html) and the COVID-19 Isolation Guide for Schools, Child Care, and Youth Programming (www.health.state.mn.us/diseases/coronavirus/schools/youthiso.pdf) for more information.

- Participants and staff who have had close contact with a person with COVID-19 should review Close Contacts and Quarantine: COVID-19 (www.health.state.mn.us/diseases/coronavirus/close.html) and the COVID-19 Quarantine Guide for Schools, Child Care, and Youth Programming (www.health.state.mn.us/diseases/coronavirus/schools/youthquar.pdf).

Handling confirmed cases of COVID-19

- Develop policies for notifying MDH about positive cases, managing case follow-up, and for notifying exposed people, consistent with Best Practices for Handling a Confirmed Case of COVID-19 (www.health.state.mn.us/diseases/coronavirus/schools/casehandle.pdf).

- Create a plan for staff or participants who test positive for or who develop symptoms of COVID-19, including:
  - Immediate isolation, in a designated isolation space, of symptomatic people or people with positive test results, and sending them home as soon as possible.
  - Notification of parents when their child becomes ill or tests positive for COVID-19.
  - Transportation home or to medical care, if needed.

- Establish a dedicated space for children or staff who are experiencing symptoms or have tested positive for COVID-19. Distinguish this space from areas where health services will be delivered to those who are well and need routine types of care (e.g., medication administration or first aid).

Transportation

- Make sure vehicles are well ventilated and use natural ventilation (e.g., opening windows) to mix fresh outdoor air with indoor air. Consider consulting with a specialist to inform specific strategies for maximizing cross ventilation under different conditions.

- Keep people who become ill during the day from using group transportation to return home.

- Create a plan for getting ill staff and participants home safely. If a driver becomes sick during the day, they should not continue to drive others and should follow program protocols for people who are ill.
Additional recommendations for overnight programs

Health screen, testing and vaccination

- Programs should ensure that campers are educated about symptoms of COVID-19 and know whom to report to should they become ill. If feasible, conduct daily health checks (for example, checking symptoms) of staff and campers according to any applicable privacy laws and regulations.

- Consider asking staff or campers to provide proof of a negative COVID-19 test taken no more than one to three days before arriving at camp. Delay arrival for campers or staff with confirmed positive test results.

- Consider having COVID-19 self-testing kits available for staff, volunteers, campers, and others who become symptomatic while at camp. For more information, visit COVID-19 Self Testing (www.health.state.mn.us/diseases/coronavirus/testsites/hometests.html).

- Work with your local public health agency for access to health care, COVID-19 testing, and transportation to a health care facility.

Lodging

- Designate staff and camper cohorts based on those who share cabins, tents, or other lodging.

- Limit lodging access to only people who reside in that lodging.

Travel


- Work with parents to develop a plan if their child becomes ill and needs to be sent home.

Additional resources
