

COVID-19 Best Practice Guidance for Children's Camps

June 17, 2022

This guidance provides best practice considerations that children's camp operators can use to help prevent the transmission of COVID-19 among campers, staff, and the public. The guidance is based on the information available and New York State mandates at the time of publication. Although camp operators are not required to implement all of the "best practices," the guidance contains requirements for illness surveillance, reporting, and management that is mandated for any illness at camp in accordance with [Part 2 \(Communicable Diseases\)](#) and [Subpart 7-2 \(Children's Camps\)](#) of the State Sanitary Code. These mandates are identified when "must" is used. Camps that do not follow the best practices recommended in this document should follow CDC guidance at [Frequently Asked Questions for Directors of Overnight Camps | CDC](#).

Current information for COVID-19 related mandates, guidance, data/trends, and travel restrictions is available at <https://coronavirus.health.ny.gov/home>. Camp directors and staff designated as responsible for COVID-19 safety and response should continue to check the New York State Department of Health (NYSDOH) webpages throughout the camp season for guidance updates.

This document is organized into three sections: the first section applies to all children's camps, and the second and third sections provide additional best practices for day and overnight camps, respectively.

Best Practices for All Camps

Prior to camp:

- Encourage [up to date](#) COVID-19 vaccination for all [eligible children](#) and staff (up to date includes boosters for everyone who is eligible and additional primary shots for some immunocompromised people). Camps may choose to establish policies for all campers and/or staff to have up to date vaccinations to attend/work.
 - Vaccination is the leading prevention strategy to protect individuals from COVID-19. Vaccinations will also help reduce the number of campers and staff who need to isolate/quarantine which will limit the impact of a positive case on the camp's operation.
 - Information for camp operators and parents/guardians that can be used to promote vaccination is available at <https://covid19vaccine.health.ny.gov/covid-19-vaccines-children-and-adolescents>.
- Collect documentation of COVID-19 vaccination status information from all campers and staff, including vaccine name and date(s) of administration.
 - Maintain a list of individuals who are not up to date with vaccinations.
- Overnight Camps should require a negative COVID-19 test prior to arrival as described in more detail in the Overnight Camp section below.
- Establish written procedures for the policies in this best practice document and designate someone to be responsible for implementation.

- During staff training include information about the camp’s COVID-19 policies, monitoring campers for COVID-19 symptoms, and reporting suspect cases to the health director.
- Maintain a supply of medical/surgical face masks.
- Instruct campers/staff to stay home if they are COVID-19 positive or show any symptoms of COVID-19 or other illnesses.

Protections/Activities:

- Conduct outdoor activities and avoid crowded and/or poorly ventilated indoor activities to the greatest extent possible. Increase/improve [ventilation](#) for indoor activities.
- Camp operators must comply with all [masking requirements](#) mandated by New York State (NYS). CDC recommends indoor masking in public for everyone in areas of [high COVID-19 Community Level](#). Policies should ensure a [masks are well-fitted](#), cover the nose and mouth, and are consistently used.
- Conduct activities that maximize social distancing (i.e., minimal person-to-person contact) at all camp program facilities and areas, especially while indoors, to the greatest extent possible.
- Except for children’s camps that consist entirely of staff and campers who are up to date with vaccinations, consider establishing groups of staff and campers in which the same group of campers stay with the same staff whenever and wherever possible. This is known as a stable group/cohort.
- Camps should maximize social distancing between groups with children/campers who do not have up to date vaccinations, especially while indoors.
- Maintain awareness of [COVID-19 Community Levels](#) and consider restricting camp trips to public settings where COVID-19 Community Levels are “low” unless campers and staff are able to maintain proper social distance from others with unknown vaccination status.
- Encourage hygiene (e.g., handwashing, cover cough and sneezes, avoid touching eyes, nose, and mouth), and increase cleaning and disinfection practices.
 - [Public and Private Facilities Cleaning and Disinfection Guidance](#)

Establish procedures for screening/testing campers and staff during camp for COVID-19:

- Camp operators must implement initial and daily health screening practices for campers which should also include staff.
 - Refer to CDC guidance on [“Symptoms of Coronavirus,”](#) for the most up to date information on symptoms associated with COVID-19.
 - Any staff, parent/guardian, or child/camper who screens positive for or exhibits symptoms of COVID-19 or has a temperature of greater than or equal to 100.4°F must not be allowed to enter the facility or area and must be sent home with instructions to contact their healthcare provider for assessment and testing. If the healthcare provider provides a diagnosis of a known chronic condition with unchanged symptoms and COVID-19 is not

suspected, then healthcare provider explanation of the alternate diagnosis should be obtained to participate in camp activities according to the usual guidelines for that diagnosis.

- While at camp, campers or staff displaying signs or symptoms of COVID-19 must be separated from other campers/staff.
- Camps intending to conduct onsite rapid antigen testing must comply with the [Limited Service Laboratory](#) requirements.
- Symptomatic individuals testing negative using a rapid antigen test should consider confirming the results with a molecular diagnostic test result for COVID-19 using a Food and Drug Administration (FDA) or DOH authorized polymerase chain reaction (PCR) or other nucleic acid amplification test (NAAT).
 - Camps should note that rapid antigen testing is not as sensitive as PCR tests at detecting infection and can lead to false negative results. However, positive rapid tests will be considered positive tests and require a camper/staff member to be excluded from camp or isolated per local health department orders following [NYSDOH guidance](#).

How to respond to a positive COVID-19 case:

- If a staff member or camper tests positive for COVID-19, camp operators must notify the local health department within 24 hours.
- Camps must cooperate with the state and local health department as required and trace all close contacts of the case, dating back to 48 hours before the case first began experiencing COVID-19 symptoms or tested positive, whichever is earlier.
 - Notify parents and guardians of campers who had known close contact with someone who tested positive for or has symptoms of COVID-19, so they have access to the information they need to take appropriate steps to protect themselves and others. Refer exposed individuals to information provided by the state or local health department and advise them to follow the quarantine guidance as noted below.
 - Isolation and quarantine guidance and tables are available at: coronavirus.health.ny.gov/new-york-state-contact-tracing
- Refer to Day Camp and Overnight Camp Isolation/Quarantine sections below for specific guidance on positive cases and unvaccinated or symptomatic vaccinated individuals who are considered close contacts of cases.

Best Practices for Day Camps

Isolation/Quarantine:

- Campers or staff who test positive for COVID-19 prior to camp must be excluded from camp for at least 5 days. Those who test positive for COVID-19 while at camp must be isolated from other campers/staff until picked up and excluded from the camp for at least 5 days.

- For campers diagnosed with COVID-19, isolation may end after 5 full days if the individual is fever-free for 24 hours without the use of fever-reducing medication and other symptoms have improved. Campers or staff must continue to mask upon return from isolation during days 6 through 10 after COVID-19 infection.
- Asymptomatic exposed or potentially exposed contacts who continue to attend camp should follow recommended testing:
 - Consider testing immediately upon learning of the exposure or potential exposure.
 - Testing on Day 5 after exposure is strongly recommended to detect infection among individuals identified as exposed or potentially exposed, regardless of vaccination status.
 - If the individual is not fully vaccinated, frequent testing (e.g., daily, every other day, at least twice within 5 days) and mask wearing from the date of the exposure or potential exposure (Day 0) through at least day 5 should be strongly considered and encouraged.
 - Individuals with lab-confirmed COVID-19 within the past 3 months do not need to get tested unless they develop symptoms.
 - Unvaccinated individuals who cannot wear a well-fitted mask, including those under age 2, must be excluded from camp for a minimum of 5 days. It is recommended that they are excluded from camp for the 10 full days.

Best Practices for Overnight Camps

Protections/Activities:

- Camps should require and ensure that all campers and staff receive a negative molecular diagnostic test result for COVID-19 using a Food and Drug Administration (FDA) or DOH authorized polymerase chain reaction (PCR) or other nucleic acid amplification test (NAAT) of comparable analytical sensitivity performance that was performed on a specimen (e.g., swab) collected within 72 hours prior to arrival at the camp.
 - In lieu of PCR testing, camps may choose to require rapid antigen testing collected within six hours prior to arrival at camp or boarding buses for transportation to camp.
 - Campers and staff with documentation of laboratory confirmed COVID-19 in the previous 3 months may be excluded from pre-camp testing if not symptomatic.
- Camp operators should consider establishing single stable group occupancy criteria for sleeping rooms/areas and quarantine/isolation needs within the guidance when determining the overall property specific capacity.

Isolation and Quarantine:

Additional bed space should be reserved to accommodate individuals who are required to isolate or quarantine (those displaying signs or symptoms of COVID-19, test positive, or are determined to be a close contact with a positive case); this also applies to having separate toilet and bathroom facilities unless procedures are in place for cleaning and disinfection between each use.

Positive Cases:

- Campers or staff who test positive for COVID-19 or have symptoms must be isolated from other campers/staff and should be excluded from camp for 10 days, or longer if symptoms persist.
 - **For staff and those campers/minors whose parents/guardians have agreed for the camp operator to provide onsite isolation**, they must not be permitted to participate in camp activities for at least 5 days. Isolation may end after 5 full days if the individual is fever-free for 24 hours without the use of fever-reducing medication and other symptoms have improved. Campers or staff must mask upon return from isolation during days 6 through 10 and return to isolation when unable to mask such as when eating, sleeping, or swimming.
 - Arrangements should be made for staff to complete required isolation including all necessary accommodations (meals, access to healthcare, etc.).
 - Individuals who test positive may isolate as a group.

Close Contacts:

- Campers and staff who are not up to date with vaccines or have not recovered from laboratory confirmed COVID-19 in the previous 3 months and are determined to be close contacts of a case must be quarantined from other campers/staff and should be excluded from camp for 10 days.
 - **For staff and those campers/minors whose parents/guardians have agreed for the camp operator to provide onsite quarantine**, they should quarantine individually and must not be permitted to participate in camp activities for at least 5 days. Quarantine may end after day 5 if the individual remains asymptomatic. Campers or staff must mask upon return from quarantine during days 6 through 10 and return to quarantine when unable to mask such as when eating, sleeping, or swimming.
 - While individual quarantine is strongly recommended, close contacts may quarantine together. Quarantine may end after day 5 if all the individuals in the cohort remain asymptomatic. However, if an individual in the group becomes positive or develops symptoms, the quarantine time will start back at day 1 for the entire cohort. Campers or staff must mask upon return from quarantine during days 6 through 10 and return to quarantine when unable to mask such as when eating, sleeping, or swimming.
 - Arrangements should be made for staff to complete required quarantine including all necessary accommodations (meals, access to healthcare, etc.).
 - Asymptomatic exposed or potentially exposed contacts who continue to attend camp should follow recommended testing:
 - Consider testing immediately upon learning of the exposure or potential exposure.
 - Testing on Day 5 after exposure is strongly recommended to detect infection among individuals identified as exposed or potentially exposed, regardless of vaccination status.

- If the individual is not fully vaccinated, frequent testing (e.g., daily, every other day, at least twice within 5 days) and mask wearing from the date of the exposure or potential exposure (Day 0) through at least day 5 should be strongly considered and encouraged.
- Individuals with lab-confirmed COVID-19 within the past 3 months do not need to get tested unless they develop symptoms.
- Campers who are waiting to be picked up by parents/guardians must be isolated/quarantined onsite with proper supervision.