



COVID-19 OPERATIONAL PLAN

Last updated April 8th, 2021

As per the Government of New Brunswick
**"COVID-19 Recovery Phase: Guidance to Early Learning and
Childcare Facilities and Day Camps"**

<https://www.nbed.nb.ca/ParentPortal/Content/Covid-19/ELCF%20May%207%202020%20EN%20FINAL.pdf>

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INTRODUCTION

The following document has been developed in correspondence with a recent release from the Government of New Brunswick. The operational plan outlines how Camp Wildwood will manage daily operations and take the additional measures necessary to help limit the risk of exposure to COVID-19. Should an outbreak occur this document also outlines the response to be taken. Depending on how the pandemic progresses in New Brunswick, this document is subject to changes.

REDUCING THE RISK OF TRANSMISSION

A grouping method will be put into place to reduce the risk of transmission between all children on site. This grouping method involves creating multiple self-contained groups within the facility.

- The size of each group will be limited to a maximum of 15 children plus 3 staff as per the required 1:5 staff to children ratio.
- Groups will be separated as much as possible and when necessary to be in the same area a minimum of 2 meters will be kept between each group.
- At the beginning of each camp staff members will be assigned to each group of children. For the entirety of the camp these same staff members will remain with the same group. A relief counsellor may step in to allow another counsellor to take a break.
- Each group of 15 will be exempt from physical distancing of 2 meters however close contact will be discouraged and limited.
- A log will be kept for each self-contained group which will include names of those in the group and the date in which the group was established, this will be kept in the main office should Public Health need it to help with contact-tracing.

DROP-OFF/PICK-UP TIMES

It is encouraged that only one identified adult per family is responsible for the drop-off and pick-up of the child to limit the amount of people entering the facility. Upon arriving at camp everyone must stay in their vehicle where they will be greeted by a staff member. The staff member will complete the screening questionnaire. See Appendix A- Screening Questionnaire for COVID-19. Following the questionnaire, the child's temperature will be taken using a non-contact thermometer. Normal temperatures used as a reference will be those provided in the thermometer manufacturer's guidelines. Parents will be asked not to leave their vehicle during this procedure. At the end of the camp when picking up their children parents will be directed upon arrival at camp and must remain in their vehicles.

ACTIVITY SESSIONS

For all activity sessions groups will remain separate and activities will be led by the group's assigned staff members. Following the activities all equipment used will be disinfected by delegated staff. If activities are to take place indoors, groups will remain physically distanced.

OUTDOOR PLAY AREA

The playground will only be used by one group of children at a time and the playground will be sanitized twice daily.

The swimming pool will only be used by two groups of children at a time where the pool will be roped off into sections to maintain distancing. Only the group, assigned staff members and required life guard shall be present at the swimming area.

MEAL TIMES

Meals will take place in the dining hall with separate tables distanced for each group. Staggered entrance times and separate entrance/exit doors will be used.

FOOD SERVING

Specific staff, informed of the following necessary precautions will be delegated to prepare and serve meals:

- All food handlers must regularly wash their hands and follow good hand hygiene.
- Any staff feeling ill must exclude themselves from kitchen duties.
- Shared pitchers of beverages are not to be used. Instead the delegated staff will portion out the necessary number of beverages at the tables into separate containers for each child.
- Utensils for each child will be set in place at the tables.
- A cafeteria line style for serving, as per usual, will continue to be used however children will only line up with their group, one group at a time.

PERSONAL HYGIENE

Children will be monitored to ensure they are washing their hands correctly. Signs depicting the following steps to properly washing your hands will be posted at all hand washing stations:

- Wet your hands and apply liquid soap or clean bar soap.
- Rub your hands vigorously together, scrubbing all skin surfaces.
- Pay special attention to the areas around your nails and between your fingers.
- Continue scrubbing for at least twenty seconds. Sing the Happy Birthday song twice!
- Rinse your hands and dry them well.
- Turn off taps with paper towel.
- Open door of bathroom with paper towel in hand and then dispose in waste basket.

Should the children be located where they do not have access to soap and water alcohol-based hand sanitizer with a minimum 70% alcohol will be used under the supervision of staff.

Hand washing will be required frequently and at a minimum at the following times

- on arrival;
- before and after meals;
- after using the toilet;
- after blowing nose, coughing or sneezing;
- after playing with shared toys;
- after handling animals or their waste;
- when taking medications; and
- after playing outside.

Apart from hand washing staff will also encourage children to refrain from touching their face.

WASHROOMS

All washrooms will be equipped with hot and cold running water under pressure, liquid soap, paper towel, toilet paper and garbage containers. Hand wash signs will be posted. Only one group may be in the washrooms at a time. Washrooms in which all people on site may use are in the conference hall and dining hall. These communal washrooms are to be cleaned frequently by delegated staff.

CLEANING AND DISINFECTION PROCEDURES

The frequency of cleaning and disinfecting will be increased. All surfaces, especially in general locations that are frequently touched such as doorknobs and hand rails will be cleaned at least twice daily. All toys and equipment used will be cleaned and disinfected between use with each

group of children. A cleaning and disinfection schedule will be made assigning specific staff. Disinfectants will be kept in a location where all staff can access but out of reach of children. The bottles of disinfectant will be mixed by a delegated staff member to ensure the proper concentrations.

STAFF

Staff will live at the camp for the duration of each camp to limit the amount of contact with the community. Staff will remain physically distanced at all times at camp. All staff will have separate sleeping areas and only the assigned staff to each group of children may share an area. Staff will be held to the same screening procedure as the children each time they leave and return to camp. Should any staff become ill they will be required to leave the facility and not able to return until they have recovered.

ACCESS TO THE FACILITY BY OTHERS

Visitors who are delivering essential supplies to the camp such as food are permitted to enter the facility during operating hours however contact between them and staff members will be limited. Non-essential visitors are not permitted to be on the premises. All visitors must sign in and a record will be kept of those who are on camp property.

PERSONAL PROTECTIVE EQUIPMENT

The camp will keep a supply of personal protective equipment for any children or staff who may become ill while at the camp. A staff member will be delegated to monitor supplies and ensure the stock is maintained.

OUTBREAK MANAGEMENT PLAN

An outbreak of COVID-19 at camp is: one confirmed case.

Note: Children or staff who have been identified as having seasonal allergies or who suffer from chronic runny nose/nasal congestion would not be considered a suspected case.

If the facility has one confirmed case of COVID-19 the facility is to advise Public Health by contacting the Regional Health Authority Public Health Nurse. **If an outbreak is declared, the camp must close. Camp will not reopen until advised by Public Health. Regional Public Health will be involved to manage the outbreak and ensure contacts are identified, public health measures are in place and will lead to any communication that is required.**

- Symptomatic children must be immediately separated from others in a supervised area until they can go home. Where possible, anyone providing care to an ill child should maintain a distance of 2 meters.
- It would be important that the group of combined children/staff the symptomatic child was in, not mix with the rest of the daycare population until the 'suspect case' is assessed.
- If a 2-metre distance cannot be maintained from an ill child, if circumstances allow, the child should wear a community mask. **Note: Masks are not recommended for children under two years of age.**
- All staff must immediately isolate from others and wear a community mask until they are able to leave the camp.
- If an outbreak is confirmed, appropriate notices will be posted and all parents/guardians will be informed.

OTHER EVENTS

Throughout the year the facility may be used for other purposes other than summer camp. Below are the guidelines to be followed:

Rentals

- For any group/individuals renting the facility they must adhere to provincial guidelines.
- All buildings will be limited to 50% capacity.

APPENDIX A: SCREENING QUESTIONNAIRE FOR COVID-19



Screening Questionnaire for COVID-19 for Early Learning Childcare Facilities and Summer Camps

Note: Children or staff who have been identified by their primary care provider (or another health care provider) as having seasonal allergies or who suffer from chronic runny nose/nasal congestion are not required to be excluded.

1.	Do you have any 2 of the following symptoms:	YES	NO
	<ul style="list-style-type: none"> • fever or feverish (flushed, warm to touch) • cough • sore throat • headache • runny nose • a new cough or worsening of a chronic cough • feeling tired • diarrhea • loss of taste or smell 		
2.	Do you have the following symptom: * In children, purple fingers and/or toes?	YES	NO
3.	Have you or anyone in the household had close contact (face to face contact within 2 meters) with a confirmed case of COVID-19 within the last 14 days? This question does not apply if you or anyone in your household is a Health Care Professional (HCP).	YES	NO
4.	For households with HCPs, have you or anyone in the household had close contact (face to face contact within 2 meters) with a confirmed case of COVID-19 within the last 14 days, outside the health care setting?	YES	NO
5.	Have you returned from travel outside of Atlantic Canada within the last 14 days and are not exempted as indicated below:		
	a) are healthy and live in one province but commute to work locally or operate a business in a neighboring province		
	b) are healthy and provide or support things essential to the health, safety, security or economic well-being of New Brunswickers, including, commercial transportation of goods by truck, train or plane		
	c) are healthy and are a resident of Campobello Island who must cross the border to access required goods and services		
	d) travelled to another province for a medical appointment	YES	NO
6.	In the last 14 days, have you or anyone in the household been diagnosed with COVID-19?	YES	NO
7.	Have you been told by Public Health that you may have been exposed to COVID-19?	YES	NO
8.	In the last 14 days, have you had close contact with an individual who is suspect of COVID-19 while providing direct patient care, and you were not wearing proper Personal Protective Equipment (PPE)?	YES	NO

If you have answered "Yes" to any of the above questions, stay home, contact 811, and do not return to the facility/ camp until clinical evaluation excludes COVID-19 or a COVID-19 test is negative. If the COVID-19 test is positive, then you must stay home and self-isolate for 14 days. Public Health will advise when isolation may be lifted.

Regarding question #5, travelling for these purposes requires that you go directly to and from your appointment/ destination and/or your accommodations; self-monitor for symptoms; avoid close contact with vulnerable individuals (for which you are not the primary care giver); and follow the guidance of the Chief Medical Officer of Health.

Name: _____

Date: _____ Time: _____