

Ministry of Health

COVID-19 Safety Guidelines for: Camps

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This guidance provides basic information only. It is not intended to take the place of medical advice, diagnosis, treatment, or legal advice.

In the event of any conflict between this guidance document and any legislation or orders or directives issued by the Minister of Health or the Chief Medical Officer of Health (CMOH), the legislation, order, or directive prevails.

This is a merged guidance document which includes guidance for both day and overnight camps. This guidance document constitutes the safety guidelines for COVID-19 for day camps produced by the Office of the Chief Medical Officer of Health **and** the safety guidelines for COVID-19 for overnight camps produced by the Office of the Chief Medical Officer of Health as referenced in subsections 19(1) and (2) of Schedule 2 of O. Reg. 364/20 (Rules for Areas at Step 3 and at the Roadmap Exit Step) made under the [Reopening Ontario \(A Flexible Response to COVID-19\) Act, 2020](#) (ROA).

- Please check the [Ministry of Health \(MOH\) COVID-19 website](#) regularly for updates to this document, [COVID-19 Reference Document for Symptoms](#), mental health resources, and other information.
- Please check the [Directives, Memorandums and Other Resources](#) page regularly for the most up to date directives. More information can be found in the [Roadmap to Reopen](#). A plan to safely reopen and manage COVID-19 for the long term, developed by the Government of Ontario.
- Please visit the [provincial COVID-19 website](#) and the [resources to prevent COVID-19 in the workplace](#) regularly for current information and additional resources to help stop the spread.

- Additional resources for camps accredited by the Ontario Camps Association and outdoor education centres may be available from the [Ontario Camps Association's COVID-19 Resources and Standards updates](#).

This guidance applies to:

- Day camps that run for a minimum of one week of consecutive days and must maintain consistent cohorts for the duration of each camp session for up to 2 continuous weeks. If a session is longer than 2 weeks or, if camp participants are enrolled in multiple consecutive sessions at the same day camp, cohorts must be kept as consistent as possible for as long as possible.
- Overnight camps that provide supervised overnight accommodation for children; and,
- Outdoor Education Centres (OECs):
 - That run for a minimum of one full day, conducted with established cohorts (e.g., school classroom cohort), and maintain the cohorts for the duration of each program session.
 - That operate overnight camps within overnight camp facilities as part of their program, or independently, by using their own or rented facilities, wilderness areas, or other destinations.

This guidance does not apply to day camps serving children who are younger than four years of age that require a childcare license issued by the Ministry of Education. Licensed child care centres must follow the COVID-19 related health and safety requirements set out in [O. Reg. 137/15](#) under the [Child Care and Early Years Act, 2014 \(CCEYA\)](#). Additional operational guidance is provided in the Ministry of Education's document entitled [Operational Guidance for Child Care During COVID-19 Outbreak](#).

Overnight camp operators must comply with all applicable legislation including [O. Reg. 503/17: Recreational Camps](#) made under the [Health Protection and Promotion Act \(HPPA\)](#).

Day camp operators must comply with all other applicable requirements outlined in policies and guidelines issued by the Ministry of Education and the Ministry of Heritage, Sport, Tourism and Culture Industries, including any other relevant requirements or instructions issued under emergency orders, policies or guidelines issued by the Government of Ontario.

In instances where camps are renting out their space for gatherings (e.g., weddings, reunions, meetings) the directions for event spaces set out in section 4 of Schedule 1 of O. Reg. 364/20 would apply.

All applicable legislation or regulations related to health and safety such as those in the [Occupational Health and Safety Act](#) (OHSA) and its regulations or in any regulation made under the [Reopening Ontario \(A Flexible Response to COVID-19\) Act, 2020](#) (ROA) continue to apply.

Day and overnight camps must also comply with any applicable municipal by-laws, section 22 orders issued by local Medical Officers of Health under the HPPA, any applicable public health advice, recommendations and instructions of the local Medical Officer of Health, and any other applicable instructions, policies or guidelines issued by the Government of Ontario.

Under the ROA regulations persons responsible for a business are required to prepare and make available a safety plan in accordance with the regulations. Employers are encouraged to use the Ontario guide to develop a [COVID-19 Workplace Safety Plan](#). Safety plans must:

- Describe the measures and procedures that have been implemented or will be implemented to reduce the risk of transmission of COVID-19;
- Describe how the requirements of the ROA regulations will be implemented including screening, physical distancing, the use of masks or face coverings, the use of personal protective equipment (PPE), cleaning and disinfecting of surfaces and objects, and preventing crowding;
- Be in writing and be made available to any person for review on request; and,
- Be posted on site, in a conspicuous place, to be seen by staff, parents of campers, and visitors.

Definitions

Camps and outdoor education centres vary considerably in their size, the population they serve, and how they operate. For the purposes of this document, the following definitions are provided:

- “Camps” unless otherwise specified means both day and overnight camps.
- “Campers” are participants of any camp program, supervised by the camp staff and/or in conjunction with other staff or teacher chaperones of a group (e.g., school group) attending the camp.
- “Staff” may work directly with campers, serving various capacities (e.g., cabin counsellors, activity instructors, support worker), and include administration staff, supervisors, drivers, kitchen, and maintenance staff.
- A “cohort” is a group of campers, and the staff assigned to them, who stay together for the duration of their time at the camp and for overnight camps also share sleeping quarters (e.g., cabins, tents).
- A “staff cohort” is a group of staff who are outside of a camper cohort and share common routines or accommodations (e.g., senior staff, kitchen staff, maintenance staff). These staff must follow public health measures when interacting with other cohorts.
- An “established cohort” is a group of campers and/or staff who have been a cohort for at least 10 days without the addition of new individuals or the occurrence of ill individuals during the 10-day period.
- An “unestablished cohort” is a group of campers and/or staff who have not been placed together as a cohort for 10 days.
- A “mask” (separate from a *medical mask*) throughout the document refers to non-medical masks that consist of multiple layers (minimum 3 layers). All masks must be well-fitting to cover the chin and nose.

Prior to Overnight Camp Opening

As per section 10 of [O. Reg. 503/17: Recreational Camps](#), all recreational camps as defined in O. Reg. 503/17 are required to develop and submit a Camp Safety Plan in writing to the local Medical Officer of Health or public health inspector before opening or operating the camp in accordance with the regulation.

Pre-arrival to Overnight Camp

1. Campers and staff attending overnight camp should limit their exposures (i.e., reduce the chances of becoming infected by limiting contact with individuals outside of their immediate household) to the greatest extent possible 10 days prior to arrival to camp. Operators of camps should request that campers and staff provide the camp with a written attestation indicating they have taken all reasonable measures to limit their exposures for the 10 days prior to their arrival.
2. Anyone travelling from outside of Canada must follow federal and provincial requirements and guidelines for quarantining, screening, and testing prior to camp. Refer to [COVID-19 testing, the federal Quarantine Act](#), and [federal travel guidelines](#).
 - Staff or campers who have been advised to quarantine cannot carry out their quarantine at the camp.
3. Staff and campers should follow all additional measures and policies required by the camp.
4. Campers or staff who are symptomatic prior to camp and are unable to arrive on the scheduled day, may enter the camp later if they:
 - have proof of a negative PCR COVID-19 test conducted within 72 hours of the arrival to camp;
 - are free of respiratory symptoms for at least 24 hours and gastrointestinal symptoms (if applicable) for at least 48 hours;
 - have not been directed by public health to self-isolate; and
 - have not had contact with a confirmed case of COVID-19 within the last 10 days.

5. The Government of Ontario encourages all Ontarians, including campers and staff, to become vaccinated against COVID-19 as soon as they are eligible.

Arrival at Day and Overnight Camp

6. Anyone entering the must be actively screened for COVID-19 upon arrival at a clearly identified location. (The exception is first responders in an emergency.) Anyone who does not successfully clear the screening must not be permitted to enter the camp.
7. Camps may use the following tools for screening campers, staff and visitors: [COVID-19 School and Child Care Screening](#). Where possible screening should be completed electronically prior to the arrival of camp. Further information on COVID-19 symptoms is outlined in the [COVID-19 Reference Document for Symptoms](#). All campers, staff, and visitors who are experiencing symptoms consistent with COVID-19, as identified in the screening tool, must not enter the camp and should follow the guidance provided in the screening tool, which may include seeking appropriate medical attention as required, and/or getting tested for COVID-19
8. Camps must keep and maintain daily records, including contact information and date/time of arrival/departure of anyone entering the camp. Records must be kept up-to-date and available to facilitate contact tracing in the event of a probable or confirmed COVID-19 case or outbreak.
9. Pick-up and drop-off of campers should happen outside of the camp or within a designated and isolated area within the campgrounds to facilitate drop-off and screening. Parents/guardians should not enter the camp or go beyond the designated drop-off/pick up area unless it is determined that there is a need, and if so, they must be actively screened and adhere to public health measures.
10. Camps should stagger the arrival and departure times of campers, where possible, to support cohorting and physical distancing.

General Requirements for Operators of Camps

General Health and Safety Requirements

11. Visitors should be limited to essential services (e.g., deliveries, contractors, conducting repairs, government inspections), must be actively screened, wear a mask, perform hand hygiene, and maintain a minimum 2-metre physical distance from others.
12. Overnight camps should limit travel from camp to the surrounding communities by both campers and staff.
 - Individuals who leave the camp area must adhere to public health measures, such as maintaining physical distancing, performing hand hygiene, and wearing a mask indoors, as required.
13. Expedition-based programs must adhere to public health measures as is reasonable in a wilderness setting. Expedition-based programs should be designed for cohorts or established cohorts.

Cleaning and Disinfecting

14. Clean and disinfect high touch surfaces as needed. Refer to Public Health Ontario's (PHO) factsheet on [Cleaning and Disinfecting for Public Settings](#).
15. Ensure all shared reusable equipment is properly cleaned and disinfected as needed.
16. The use of shared materials is permitted. The risk associated with transmission with shared objects is low. The focus should be on regular hand hygiene and respiratory etiquette to reduce the risk of infection related to shared equipment, particularly when regular cleaning of shared objects is not feasible.
17. Check the expiry dates of cleaning and disinfectant products and follow the manufacturer's instructions for application method, contact time, and PPE required during use. Ensure that the product used is compatible with the item to be cleaned and/or disinfected.
18. Laundering of items no longer requires enhanced measures.

Hand and Respiratory Hygiene

19. Promote and perform frequent, proper hand hygiene methods (including supervising or assisting campers with hand hygiene). Refer to PHO's [How to Wash Your Hands](#) fact sheet for more information.
20. Educate staff and campers when to perform proper hand hygiene including before and after eating and using shared equipment, after activities, after toileting, blowing their nose, and before touching their faces.
21. Educate staff and campers on proper respiratory hygiene and ensure each camper and staff member follows appropriate respiratory hygiene ensuring to cough/sneeze into their elbow, sleeve, or tissue.
22. Ensure alcohol-based hand rub with 60% to 90% alcohol concentration is available throughout the camp to promote frequent hand hygiene when access to water, soap and paper towels is not possible.
23. Ensure staff have an established process and schedule for monitoring and replenishing hand hygiene supplies.
24. Adapt hygiene (hand and respiratory) and disinfection practices on wilderness expeditions appropriately for the wilderness setting (e.g., using alcohol-based hand sanitizer when hands are not visibly soiled).

Physical Distancing

25. Ensure physical distancing is practiced by any visitors permitted to enter the camp.
26. Practicing physical distancing is not required within a cohort; however, physical distancing of at least 2 metres must be maintained between individuals in separate cohorts.
27. Ensure physical distancing between cohorts by:
 - Choosing or modifying activities to minimize physical contact;

- Placing campers and/or cohorts into different areas. Exceptions may be made where safety limits the ability to distance (e.g., emergency drills, first aid, severe weather) or for those with special needs;
- Spreading equipment, furniture, and activity stations out into different areas to allow for more space;
- Using visual cues (e.g., signs, posters, floor/ground markings) while considering the requirements of [Accessibility for Ontarians with Disabilities Act](#) (AODA);
- Staggering or alternating common routines such as showering/bathing, mealtimes, aquatic, and other activities to reduce the number of individuals in common areas where physical distancing may not be possible;
- Incorporating more individual activities or activities that encourage increased space between campers and/or cohorts;
- Using telephone or video conferencing when possible for meetings between staff and parents/guardians (e.g., Visitor's Day); and,
- Considering staff ratios and staff expertise that may be needed to support campers with special needs. Physical distancing may be more challenging to achieve for campers who have communication issues, behaviour challenges, or require physical assistance.

Cohorting

28. Operate programs in cohorts (including staff members) who remain together throughout the duration of the program with the following considerations:

- Cohorts should be organized and sized in manner that ensures staff/camper ratios as described by [O. Reg. 503/17: Recreational Camps](#) made under the HPPA for overnight camps and the guidance in the [Operational Guidance for Child Care During COVID-19 Outbreak](#) for day

camps (refer to Table 1 in the Appendix), and where applicable, the [Child Care and Early Years Act, 2014](#). Cohort limits in overnight camps should be reflective of the size of the cabin/tent or sleeping arrangements. For example, a cabin with 10 beds would be a cohort of 8 campers, plus the 2 staff member(s) assigned to that cohort;

- The number of campers and staff within each cohort can vary to facilitate common grouping arrangements (e.g., according to age groups, leadership training programs, campers with special needs, length of stay) or groupings outside of camp (e.g., classroom cohorts);
- If a camper requires a support worker or other additional personal assistance, the support or other person providing personal assistance does not need to be included in the cohort count, but the individual must stay with the cohort and must follow all policies and protocols for staff;
- Campers staying for multiple, overlapping sessions should remain together. Campers that are new or only staying for one session should be placed together to avoid mixing of cohorts;
- Campers and staff should maintain physical distance of at least 2-metres from other individuals outside their cohort and should continue to follow other public health measures;
- Limit having multiple cohorts simultaneously sharing indoor spaces by staggering activities for cohorts at different times. Where this is not possible, cohorts should have their own designated space separated from other cohorts by a visual cue or physical barrier that does not interfere with the airflow or ventilation or pose a safety/fire hazard. Cohorts should physically distance and wear masks; and,
- Even within cohorts, personal belongings brought to camp should not be shared between individuals. Personal items (e.g., pillow, clothing, towel, water bottle, toiletries) should be labeled or clearly identifiable and kept in the individual's designated cohort area.

For overnight camps only:

- Cohorts must not to mix (i.e., be within close contact with one another) with other cohorts both indoors and outdoors without proper public health measures in place until 10 days of camp has elapsed; and,
- After 10 days, without any new individuals added, without any exposures to others outside of the cohort, and without any illnesses, the cohort is considered an “established cohort” and is able to mix with other established cohorts without physical distancing outdoors and indoors.

Accommodations and Indoor Spaces for Overnight Camps

29. Living accommodations (cabin, tent, or bedroom) must be shared only amongst members of a single cohort.

30. Where buildings have individual bedrooms and shared spaces with other cohorts, masks must be worn in common spaces with other cohorts.

- The entire building may become an established cohort after 10 days have elapsed provided there are no new individuals have been added, and there have been no reported illnesses or cases within the 10 days.

31. Ventilation should be optimized by using screen doors, regularly opening windows, and using exhaust fans, where available.

32. For wilderness travel using tent accommodations camps should ensure that the tent/temporary structure must only be shared among a cohort or established cohort, and ventilation should be optimized, where possible.

Eating and Drinking

33. Drinking water fountains should only be used with a cup or water bottle.

- Post signage at the drinking water fountain advising campers and staff to avoid placing their mouth on the spout or allowing their water bottle/cup to touch the spout.

34. If food service is being provided to campers and/or staff, ensure the following:

- Campers and staff perform proper hand hygiene before and after eating;
- Campers and staff within a cohort must be distanced from other cohorts and staff;
- Tables must be spaced at a minimum of 2-metres apart to ensure campers/staff of different cohorts are physically distanced while seated at a table;
- Eating outdoors should be prioritized, where possible. If eating indoors, physical distancing between cohorts must be maintained, or stagger mealtimes between cohorts if there is not adequate space;
- Masks should be worn within indoor dining areas, unless eating or drinking (i.e., campers should leave their masks on until they start to eat/drink);
- Self-serve or staff-assisted food buffets are permitted with adequate physical distancing while in the queue;
- 'Family style' shared platters at each table is permitted within a cohort, and restricted to each table;
- Utensils and other items (e.g., plates, cups, condiments) must be kept and dispensed in a manner to prevent cross contamination;
- Staff involved in food preparation must follow guidance for [Restaurant and food services health and safety during COVID-19](#);
- Cleaning and disinfection procedures must be followed for all surfaces and items used in the food-service chain; and
- Wilderness expedition-based programs should adhere to the guidelines as described above, with adapted routines for wilderness settings.

Masking and Personal Protective Equipment

35. Education must be provided for the safe and proper use, limitations, care, and disposal of masks. Refer to the [provincial COVID-19 website](#) or [PHO's factsheet on masks for source control](#) for more information on masks.

36. Masks must be worn by all staff and campers indoors, unless the individual:

- Has a medical condition or special need that inhibits their ability to wear a mask or face covering;

- Is unable to put on or remove their mask or face covering without the assistance of another person;
- Is being accommodated in accordance with the *Accessibility for Ontarians with Disabilities Act*;
- Is being reasonably accommodated in accordance with the *Human Rights Code*;
- Is with their cohort, or in a space with other cohorts where there is adequate [ventilation](#) and physical distancing
- Is eating or drinking;
- Is in their designated accommodation (with their cohort);
- Is at their desk or workspace (for staff); or,
- Is placed behind a barrier (desk/workspace for staff).

37. Reasonable exceptions are expected to be put in place by camp operators following provincial guidance. Refer to the [Government of Ontario's Guidance on Face Coverings and Face Masks](#), [Government of Ontario's Guidance on Using Masks in the Workplace](#).

Note: It is not a provincial requirement, nor is it encouraged to obtain a doctor's note related to a medical exemption for masking requirements

38. Masks are not required in outdoor spaces; however, cohorts should maintain at least a 2-metre physical distance from other cohorts.

39. Masks should be assigned to individuals and are not to be shared, even after laundering.

40. Staff are expected to wear a mask if they are with a camper outside of their cohort during routine or emergent situations (e.g., driving a camper to a medical clinic). In instances where there is close contact (less than 2m) indoors with an unmasked individual, a medical mask and eye protection (e.g., face shield or goggles) is required.

- Masks are not needed when urgent actions are required to support child safety.

41. Where physical distancing cannot be maintained from individuals who are exempt from wearing a mask, medical masks and eye protection are to be worn by the staff member and/or support-worker who are attending to them and is not part of the individual's cohort.

42. Appropriate PPE (i.e., medical mask, gloves, gown, eye protection) is required for staff in instances where assistance with activities of daily living (e.g., feeding, toileting) are provided to campers.
43. A PPE kit should be maintained specifically for managing those who become ill while at camp. The kit should be readily available, and staff should be trained to use this kit. The kit should include at a minimum: alcohol-based hand rub, medical masks, gowns and gloves, and eye protection.
44. Masks should be avoided if undue risk may occur, or if breathing is difficult during extreme weather conditions. In these instances, physical distancing must be maintained.
45. Campers and staff should change masks when visibly soiled, damp, or damaged.
46. Expedition-based programs must adhere to physical distancing and masking as described throughout this guidance.

Transportation

Where travel outside of camps occurs:

47. Camps should, where possible, have direct-to-camp and direct-to-home transportation, and to limit or eliminate contact with the general community while travelling to and from camp.
48. Transportation of campers or staff may occur by private transport or use of chartered buses for large numbers of campers or staff in accordance with the following measures:
 - Transportation should be organized by cohorts or established cohorts;
 - Mass transportation by chartered school or coach buses of non-cohort campers or staff to camps, OECs, or wilderness settings may be considered in addition to private or family-transport, provided public health measures are followed;
 - Parents/guardians dropping off/picking up campers or staff directly at the source/destination of transportation wear a mask and maintain a physical distance of 2-metres from other campers, staff, and parents/guardians;

- Campers and staff must be actively screened prior to boarding the bus. Staff/campers must not be permitted to board the bus if they do not pass the screening;
- All passengers must properly clean their hands prior to boarding;
- Eating and drinking should be discouraged;
- Masks must be worn on the bus;
- For chartered bus transport, a seating plan of all passengers including the date of travel is required and must be maintained for all transportation for the purpose of contact tracing;
- Ensure ventilation or adequate air-exchange while in transit (e.g., open windows/roof hatches) and weather permitting;
- Physical distancing measures should be maintained between cohorts in buses as outlined in [Government of Canada Transportation](#) document where possible;
- Where the driver/operator is not a part of the cohort there should be a physical barrier or empty seat directly behind the driver/operator. The driver/operator must adhere to the transportation company's safety plan and wear a mask if it does not impede in the operation of the vehicle;
- Personal belongings and baggage should be handled by the owner of the items, or by a designate using appropriate public health measures;
- Operators of group transportation must ensure that the vehicle is cleaned and disinfected with approved disinfectant products during a regular cleaning schedule, including high contact surfaces.

49. Public transportation for field trips and off-site activities is discouraged due to the increased risk of potential exposure to COVID-19. However, if avoiding public transportation is not possible for essential camp activities, the following must be adhered to:

- Performing hand hygiene prior to and after each trip;
- Masking is required for those aged 2 and above;

- Eating and drinking should be discouraged;
- Touching of contact surfaces should be avoided, where possible;
- Remaining in assigned cohort groups for the duration of the trip; and,
- Maintaining physical distancing, where possible, from those outside of the cohort.

Activity Considerations:

50. Outdoor programming is encouraged as much as possible.
51. Physical distancing must be practiced for outdoor activities where multiple cohorts are present.
52. When developing a contingency plan for outdoor activities that may be cancelled due to poor weather conditions, avoid contingencies that might require multiple cohorts to seek refuge in a cramped space.
53. Restrict program activities involving food preparation to a single cohort at a time with masks recommended during food preparation. Refer to the "Meals" section for additional information.
54. Activities involving animals should follow all requirements for health and safety as set out in this guidance as well as the [Recommendations for the Management of Animals in Child Care](#) document.
55. Stagger the use between cohorts of indoor rooms/spaces. Ensure the rooms/spaces are cleaned and disinfected before and after use.
56. Activities that involve singing or the playing of brass or wind instruments are permitted.
 - Use of brass and wind instruments is permitted indoors within the same cohort or established cohort with physical distance of at least 2 metres and adequate ventilation.
 - Singing is permitted indoors. Masking is encouraged, but not required if a physical distance of at least 2 metres between cohorts and as much as possible within a cohort can be maintained.
 - Use of brass and wind instruments and singing is permitted outdoors with physical distancing of at least 2 metres.

57. Camps with aquatic activities (e.g., pool, lake, splash pad) must adhere to the applicable requirements in [O. Reg 503/17: Recreational Camps](#) for overnight camps and [Regulation 565: Public Pools](#) under the HPPA, as well as, municipal or local guidance and restrictions in place at the time of activity. Refer to the Lifesaving Society for more information on [reopening pools and waterfronts](#).
58. Camps where campers participate in sports and recreational fitness activities must adhere to the applicable requirements set out in subsection 16(1) of Schedule 2 of O. Reg. 364/20 regardless of the setting in which the camp activities are taking place.
 - In Step 3 of the Roadmap to Reopen, high and low contact sports and recreational fitness activities are permitted indoors. Masking is encouraged for indoor sports/activities where they can be worn safely based on the activity. If playing sports/activities indoors with individuals of a cohort or if physical distancing can be maintained, masks are recommended not required.
 - High and low contact sports and recreational fitness activities are permitted outdoors. Masking is recommended not required while playing sport/activities outdoors.

Wilderness Expeditions:

59. Wilderness expeditions should only take place with a single cohort.
60. Camps with wilderness expeditions that originate at a camp or a pre-determined location and travel as a cohort must:
 - Ensure pre-trip screening is undertaken and documented for all staff and campers;
 - Be comprised of a single cohort. Staff or trip leaders who are outside of the cohort must adhere to public health measures, including separate sheltering;
 - Ensure accommodation in tents or shelters follow the public health measures for cohorts, as described above;
 - Ensure there is an understanding of the public health situation and respective requirements in the communities/regions the expedition may travel to;

- Consider issuing individual equipment if possible (e.g., canoe packs/barrels) and when not possible, maintain the equipment under a regular cleaning schedule;
- Ensure proper hygiene and food safety practices and use of masks for food preparation; and,
- When route planning, consider evacuation service capacity levels and expedition area(s) that allow for easier access in the event of an emergency.

Regular Health Monitoring

61. Active daily screening of campers and staff for [COVID-19 symptoms](#) should be performed and records maintained, with appropriate follow-up assessment and isolation if deemed required by on-site medical/health staff. If medical/health professionals are not on site, consultation with trained medical/health professionals is advised to establish consistent decision-making when distinguishing between symptoms that are similar to COVID-19 symptoms, other upper-respiratory tract infections, or seasonal allergies.
 - Campers should be made aware, in age-appropriate and non-stigmatizing language, how to identify symptoms of COVID-19 and should be instructed to speak to a staff member immediately if they feel ill.
62. Medical/health staff or delegates at camps should be aware of documented seasonal allergies or pre-existing conditions that are not COVID-19 related (e.g., chronic runny nose, congestion, migraines) before determining subsequent assessment, isolation of the individual and/or testing for suspected COVID-19 cases.
63. Refer to "Management of Individuals with Symptoms of COVID-19" section below for anyone with symptoms of COVID-19.

Management of Individuals with Symptoms of COVID-19

64. Camps should have a written plan in place for staff and campers who become ill that includes procedures for obtaining COVID-19 testing in accordance with the [COVID-19 Provincial Testing Guidance](#).
65. If a camper or staff member begins to experience symptoms of COVID-19 while at camp:
- The ill individual must be immediately separated and isolated in a designated space for probable COVID-19 cases that is separate from the regular health centre/first aid facility, for further assessment and until they can return home or be placed in suitable isolation at the camp, pending advice of the [local public health unit](#) and the parents/guardians (where appropriate);
 - Anyone providing care to an individual with COVID-19 symptoms must use appropriate droplet and contact precautions, including a medical mask, eye protection, and gown, and where possible, maintain a distance of at least 2 metres;
 - The ill individual must wear a medical mask if tolerated, and be reminded about frequent hand hygiene and respiratory etiquette;
 - Whenever possible, arrange for a medical/health professional to perform or assist with COVID-19 assessments, ensuring that appropriate public health measures (e.g., PPE) are followed;
 - Ill individuals, without documented seasonal allergies or pre-existing conditions that are not COVID-19 related, should be directed to be tested according to the [Provincial Testing Guidance](#):
 - Symptomatic staff and campers should follow the advice of the [COVID-19 School and Child Care Screening](#) where appropriate and contact their health care provider where needed. They may also complete the [COVID-19 self-assessment](#) for further direction on testing recommendations.
 - Refer to Ministry of Health website for [testing locations](#).

- If a camper or staff member receives a negative molecular test result for COVID-19, isolation from others at the camp is advised until they do not have a fever, their respiratory symptoms have been improving for at least 24 hours, their gastrointestinal symptoms (if any) have been improving for 48 hours, and they have been directed by the local public health unit or their health care provider to end self-isolation.
 - Confirmed or probable cases of COVID-19 should not stay at the camp for their self-isolation period;
 - In wilderness settings, campers or staff that are required to have close contact with an individual with COVID-19 symptoms, must wear a medical mask and eye protection, and staff should isolate the individual from the group where feasible.
 - Expedition based programs should work with their wilderness medical protocols, medical advisor, local public health unit, and families, where appropriate, to determine the next course of action.
 - The isolation space and any other areas of the camp where the ill individual was staying should be cleaned and disinfected once the camper or staff leaves camp and/or their accommodation;
 - Once a case has been identified by the public health the local public health unit will use this guidance document to determine next steps: [COVID-19 Guidance School Case and Contact and Outbreak Management](#); and,
 - Consultation with the local public health unit is required.
66. If an ill staff member cannot return home, they must be placed in a suitable isolation space and if one is not available, suitable arrangements for off-site isolation must be made. For more information on the clearance of cases and contacts, please refer to the [COVID-19 Provincial Testing Clearance and Guidance](#) document.

Management of Contacts of Individuals with Symptoms of COVID-19

67. Camps should have a written plan in place for management of close contacts of staff and campers who become ill with symptoms of COVID-19.
68. If an ill individual has symptoms of COVID-19, their cohort should self-isolate until test results are available for the symptomatic individual. The isolated cohort should not come within 2 metres of any other cohorts, campers, staff, or visitors.
69. If the symptomatic individual tests positive for COVID-19 (i.e., a confirmed case), all campers and/or staff in their cohort and/or any other close contacts should be tested for COVID-19 and should be separated and isolated in a designated space that is separate from the health centre/first aid facility until they can be transported home or to an off-site location for their self-isolation or other next steps as may be determined in consultation with the local public health unit. Camps must follow directions of the local public health unit regarding the management of symptomatic campers, staff, and any other close contacts.

Reporting

70. Camps must report probable or confirmed cases of COVID-19 to their [local public health unit](#) to support case management and contact tracing. The local public health unit will provide specific advice on testing and outbreak management procedures.
71. For guidance on the ability for campers and staff who tested positive but are cleared from isolation to return to camp, camps should refer to the [COVID-19 Provincial Testing and Clearance Guidance](#) document and consult with the local public health unit for further advice.

Outbreak Management

72. A written outbreak management plan must be included within the overnight and day camp's safety plan.
73. An outbreak is declared by the local medical officer of health or their designate.

74. A **confirmed outbreak** in a camp is defined as two or more lab-confirmed COVID-19 cases in campers and/or staff (or other visitors) in a camp with an epidemiological link, within a 10-day period, where at least one case could have reasonably acquired their infection in the camp. Some examples of reasonably having acquired infection at camp include:

- No obvious source of infection outside of the camp setting; or
- A known exposure in the camp setting.

75. All cases of COVID-19 should be investigated and managed according to the [Public Health Management of Cases and Contacts of COVID-19 in Ontario](#).

76. Once an outbreak has been declared, the local public health unit will make recommendations on testing and provide guidance on outbreak control measures.

Testing During an Outbreak

77. In the event an outbreak of COVID-19 is declared at a camp, operators must consult with the local public health unit to determine which campers and staff should undergo PCR testing for COVID-19.

Control Measures

78. Control measures are any actions or activities that can be used to help prevent, eliminate, or reduce a hazard. These may include, but are not limited to:

- Defining the outbreak area (i.e., affected cohorts or entire camp);
- Undertaking enhanced cleaning and disinfecting practices;
- Modifications to programming; and,
- Isolating the affected cohorts from other staff and campers.

Camp Dismissal

79. The decision to close a camp due to an outbreak of COVID-19 should be considered if campers and/or staff in two or more cohorts test positive for COVID-19 and could have reasonably acquired their infection in the camp within a 10-day period, or at the advice of the local medical officer of health,

80. Camp dismissal may also be considered for operational reasons (e.g., if there is insufficient staffing to support the remaining cohorts).

Declaring the Outbreak Over

81. The local medical officer of health or their designate is responsible for declaring the outbreak over.

Occupational Health & Safety

82. The [*Occupational Health and Safety Act \(OHSA\)*](#) requires employers to take every precaution reasonable in the circumstances for the protection of a worker. This requirement applies to all Ontario workplaces and stipulates control measures to protect workers from infectious disease hazards such as COVID-19.
83. Employers should have written measures and procedures for worker health and safety, developed in consultation with the joint health and safety committee or health and safety representative including measures and procedures for infection prevention and control;
84. If an employer is advised that one of their workers has tested positive for COVID-19 due to exposure at the workplace, or that a claim has been filed for an occupational illness with the Workplace Safety and Insurance Board (WSIB), the employer must give notice in writing within four days to:
 - the Ministry of Labour, Training and Skills Development
 - the workplace's joint health and safety committee or a health and safety representative
 - the worker's trade union (if applicable)
 - Additionally, employers must report any occupationally acquired illness to the WSIB within three days of being informed

Appendix

Table 1: Maximum Cohort Sizes and Staff Ratios for Day Camps

Age Category	Age range of age category	Ratio of staff to camp participants	Maximum Number of camp participants in cohort (not including staff)
Kindergarten	4 years up to 6 years	1 to 13	26
Primary/Junior School	6 years up to 9 years	1 to 15	30
Junior School	9 years up to 13 years	1 to 20	20
Secondary School	> 13 years	1 to 20	20