

**Recommendations for Youth & Summer Camp Programs  
June 1, 2021**



The City of Austin and Austin Public Health (APH) have the following recommendations on best practices for Youth and Summer Camp programs. These recommendations are not intended to be comprehensive guidance. Rather, they are designed to supplement the following:

- [Guidance for Operating Youth and Summer Camps During COVID-19](#) and [Youth Programs and Camps: Readiness and Planning Tool](#) from the Centers for Disease Control and Prevention (CDC);
- [Field Guide for Camps from the American Camp Association](#); and
- [Health Recommendations for Day Youth Camp Operators](#) from the state.

Following these supplementary recommendations to the greatest extent possible will further minimize the risk of coronavirus transmission and help keep staff, children, and families safe.

APH also strongly encourages camps to consult the [COVID-19 Risk-Based Guidelines](#) which provide recommendations on ways to stay safe during the pandemic based on the stages of risk and vaccination status.

This document contains recommendations on the following topics:

- A. Screening
- B. Drop-Off and Pick-Up
- C. Face Coverings
- D. Physical Distancing
- E. Group Sizes, Gatherings & Events
- F. Maintaining Healthy Environments
- G. Field trips
- H. Transportation
- I. Sick Staff Members or Campers
- J. Testing
- K. Vaccination

**A. Screening**

1. Ask parents, guardians, or caregivers to monitor their children for [signs of infectious illness including COVID-19](#).
  - a. Conduct daily health checks (for example, [symptom checking](#)) of staff, campers and volunteers safely and respectfully, and in accordance with any applicable privacy laws and regulations.
  - b. Any individuals who have symptoms of any infectious illness or symptoms of COVID-19 should not attend the camp program.
  - c. **Deny entry to any adult or child who:**
    - i. Has a temperature greater than or equal to 100.0 degrees Fahrenheit
    - ii. Has signs or symptoms of COVID- 19, such as fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and/or diarrhea;

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- iii. Has had [close contact, as defined by the CDC](#), with someone who has a confirmed diagnosis of COVID-19; or
    - iv. Has a confirmed diagnosis of COVID-19.
  2. Camps should [educate staff, campers, and their families](#) about when they should [stay home](#) and when they can return to camp.

### **B. Drop-Off and Pick-Up**

1. It is recommended that programs have parents complete the pick-up and drop-off of children outside of the operation unless the parent requests to come in the building.

### **C. Face Coverings**

Summer camps serve children who are not yet eligible for the COVID-19 vaccine or are in an age group that only recently became eligible for vaccination. Because of this, APH has the following recommendations for individuals in summer camps, regardless of the individual's vaccine status.

1. Summer camps that are not affiliated with government entities are strongly urged to require face coverings when:
  - a. Indoors for:
    - i. All camp staff and volunteers;
    - ii. Parents and guardians dropping off and picking up campers; and
    - iii. All campers.
  - b. Outdoors for everyone unless:
    - i. Individuals are engaged in physical activity and maintaining a physical distance of at least 3 feet from others, and/or
    - ii. The camp adopts a written policy that allows an individual who is fully vaccinated to remove their face covering when outdoors and posts a sign explaining that policy at or near each entrance and where information is customarily posted for workers and families.
  - c. On camp-provided [transportation](#).
2. Summer camps affiliated with government entities are urged to strongly recommend face coverings when:
  - a. Indoors for:
    - i. All camp staff and volunteers;
    - ii. Parents and guardians dropping off and picking up campers; and
    - iii. All campers.
  - b. Outdoors for everyone unless:
    - i. Individuals are engaged in physical activity and maintaining a physical distance of at least 3 feet from others, and/or
    - ii. Individuals who are fully vaccinated choose to remove their face covering
  - c. On camp-provided [transportation](#).

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3. Face coverings should not be placed on:
  - a. Children younger than 2 years old;
  - b. Anyone who has trouble breathing or is unconscious;
  - c. Anyone participating in activities where the mask could get wet, like swimming at the lake or pool;
  - d. Anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance;
  - e. A child with a significant behavioral or psychological issue undergoing treatment that is exacerbated specifically by a face covering;
  - f. A child with severe autism or with extreme developmental delay who may become agitated or anxious wearing a mask;
  - g. A child with a facial deformity that causes airway obstruction.
4. Refer to the CDC's [Guidance for Wearing Masks](#) for additional information on face coverings.

### D. Physical Distancing

1. Establish camp policies and implement strategies to promote physical distancing of at least 3 feet between individuals for both indoor and outdoor activities.
2. It is strongly recommended that camps increase physical distancing to 6 feet between individuals when they are singing, playing musical instruments, chanting, or shouting.
3. Ensure physical distancing of 3 to 6 feet among individuals when they are eating and drinking.

### E. Group Sizes, Gatherings & Events

1. Because the [Open Texas Checklist for Day Youth Camp Operators and Staff](#) does not specify group sizes, it is strongly recommended that camps not exceed the ratio and group size limits specified in the [Open Texas Checklist for Child Care Centers](#).
  - a. Youth and summer camp programs are strongly encouraged to further reduce group sizes beyond those protocols. Keeping group sizes as small as possible reduces the risk of coronavirus exposure and spread.
2. Place campers in [cohorts, or pods, whenever possible](#). Cohorts (or "pods") are groups of campers and staff that stay together throughout the day to minimize exposure to other people while at camp.
  - a. Cohorting should not replace other prevention measures, including wearing masks.
3. It is strongly recommended that youth and summer camp programs do not:
  - a. Hold group gatherings, events, or assemblies beyond the regular camp services;
  - b. Invite outside visitors or guests whose presence or service is not essential;
  - c. Perform activities that have the potential to produce respiratory droplets including singing, chanting, shouting, or playing an instrument inside. If programs do include these activities, they should be done outside, and campers and staff should and maintain at least 6 feet physical distance.

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#### F. Maintaining Healthy Environments

1. Camps should follow CDC guidance on cleaning, disinfection, ventilation, water systems, use of shared items, communal spaces, and food service.
2. If camps serve food:
  - a. Food must be served as individually plated meals and should not be served family-style.
  - b. Campers should not share food.
  - c. Disposable food service items should be provided unless non-disposable food service items are handled with gloves and washed with dish soap and hot water or in a dishwasher.
  - d. Individuals who touch used food service items must wash their hands even if the individual wears gloves.
  - e. Remind individuals to remain at least 3 feet apart when eating.

#### G. Field trips

1. It is strongly recommended that youth and summer camp programs:
  - a. Avoid field trips to locations where campers will be in contact with large groups of people or many people crowded together; and
  - b. Consider planning walking field trips rather than trips requiring transport in vehicles.
2. Walking trips to nearby outdoor natural spaces are a safer option than field trips to indoor locations.

#### H. Transportation

1. If transport is provided, in addition to the state [Open Texas Checklist for Day Youth Camp Operators and Staff](#) on transportation for camps, it is strongly recommended that staff:
  - a. Screen all passengers before they enter the vehicle;
  - b. Ensure all individuals wear face coverings (driver and passengers); and
  - c. Consider the guidance on travel by bus or van in section 9.2 of the [American Camp Association Field Guide for Camps](#).
2. See the appendix for detailed bus seating configurations and occupancy level recommendations that allow for physical distancing.

#### I. Sick Staff Members or Campers

1. Immediately separate staff and campers with COVID-19 symptoms (such as fever, cough, or shortness of breath) at camp.
  - a. Plan to have an isolation room or an area, preferably with access to a separate restroom and ensure that isolated children are still under adult supervision.
  - b. Refer to the CDC information on [Preparing for When Someone Gets Sick](#) in the Guidance for Operating Youth and Summer Camps, including specifics on isolating and transporting children and staff who have symptoms while at camp and advising sick people of home isolation recommendations. The CDC also provides these useful flow charts: [What to Do if a Child Becomes Sick or Receives a New COVID-19 Diagnosis in your Child Care Center](#) and [COVID-19 Child Care Symptom Screening Flowchart](#).

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2. Email [ChildCareInfo@austintexas.gov](mailto:ChildCareInfo@austintexas.gov) or call the Austin Public Health Nurse Line at 512-972-5560 to:
  - a. Ask questions about suspected or potential COVID-19 cases or exposures; and
  - b. Report any laboratory confirmed cases of COVID-19 among campers or staff.
3. The Nurse Line staff will advise camps on next steps for suspected or confirmed cases of COVID-19.
4. It is recommended that staff keep daily logs for each stable group that conform to the following requirements to support Austin Public Health in conducting contact tracing of cases if necessary: camper name, drop-off and pick-up time, adult dropping off and picking up, all staff that interact with stable group of campers (including floater staff), hours and locations where camper was in attendance.

**J. Testing**

1. Recommended that staff exhibiting new or worsening symptoms of possible COVID-19 seek a COVID-19 test. Enrollment for free public testing can be found at <http://www.austintexas.gov/covid-testinfo>.

**K. Vaccination**

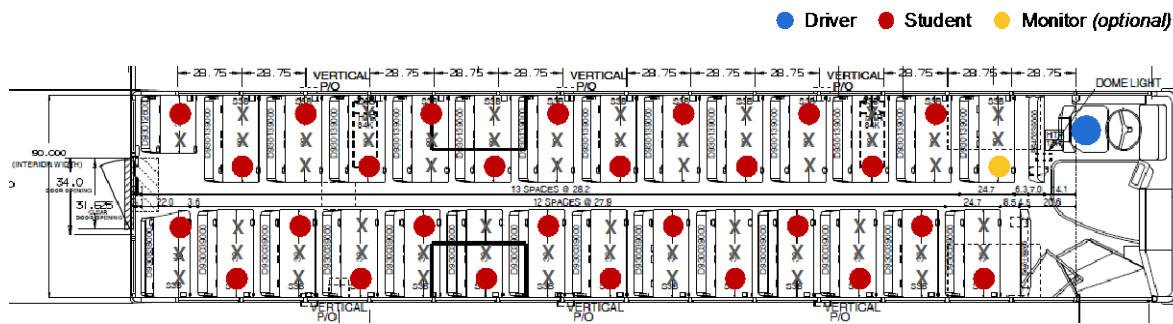
Getting vaccinated as soon as the opportunity is available is an [important way for camp operators and staff to keep from getting and spreading COVID-19](#).

1. Encourage staff to get vaccinated. Make use of the CDC's [COVID-19 Vaccine Toolkit for Staff in School Settings and Childcare Programs](#) to share information about vaccines with staff.
2. Share these websites for information on obtaining a vaccine and finding vaccine locations: <http://www.austintexas.gov/covid19-vaccines> and [Vaccines.gov](http://Vaccines.gov).
3. Vaccines are not yet approved for use in children of all ages, although vaccine trials are currently underway. For this reason, even after camp employees are vaccinated, **APH recommends that camps continue prevention measures for the foreseeable future.**

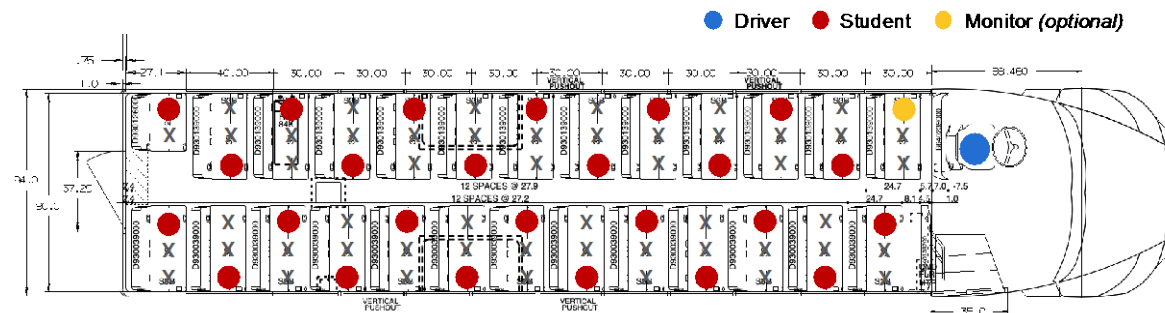
# Appendix – Example Bus Seating Configurations and Capacity Estimates

Source: Massachusetts Department of Elementary and Secondary Education,  
Fall Reopening Transportation Guidance, July 22, 2020

**Bus Model: 83-passenger bus**  
**Max. capacity with physical distancing requirements: 27 passengers (33% full capacity)**  
**Seat map configuration:**



**Bus Model: 77-passenger bus**  
**Max. capacity with physical distancing requirements: 25 passengers (32% full capacity)**  
**Seat map configuration:**



**Bus Model: 71-passenger bus**  
**Max. capacity with physical distancing requirements: 23 passengers (32% full capacity)**  
**Seat map configuration:**

