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# 2020 Summer Camp COVID-19 Intake Guidelines

Boys & Girls Clubs of Clifton

May 13<sup>th</sup>, 2020

# Latest Intake CDC Guidelines

- Guidance for Child Care Programs that Remain Open:
  - <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>
- Parent Drop-Off and Pick-Up:
  - <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#pickup>
- Screen Children Upon Arrival:
  - <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#ScreenChildren>

# Parent Drop-Off and Pick-Up

- Hand hygiene stations should be set up at the entrance of the facility, so that children can clean their hands before they enter.
- If a sink with soap and water is not available, provide hand sanitizer with at least 60% alcohol next to parent sign-in sheets.
- Keep hand sanitizer out of children's reach and supervise use. If possible, place sign-in stations outside, and provide sanitary wipes for cleaning pens between each use.
- Consider staggering arrival and drop off times and plan to limit direct contact with parents as much as possible.
  - Have child care providers greet children outside as they arrive.
  - At the end of the day, walk all children back to their cars.
- Ideally, the same parent or designated person should drop off and pick up the child every day.

# Screen Children Upon Arrival

- Persons who have a fever of 100.40 (38.00C) or above or other signs of illness should not be admitted to the facility.
- Encourage parents to be on the alert for signs of illness in their children and to keep them home when they are sick.
- There are several methods that facilities can use to protect their workers while conducting temperature screenings. The most protective methods incorporate social distancing (maintaining a distance of 6 feet from others) or physical barriers to eliminate or minimize exposures due to close contact to a child who has symptoms during screening.

# Example 1 of Screening Methods

## Reliance on Social Distancing

- Ask parents/guardians to take their child's temperature either before coming to the facility or upon arrival at the facility. Upon their arrival, stand at least 6 feet away from the parent/guardian and child.
- Ask the parent/guardian to confirm that the child does not have fever, shortness of breath or cough.
- Make a visual inspection of the child for signs of illness which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.
- You do not need to wear personal protective equipment (PPE) if you can maintain a distance of 6 feet.

# Example 2 of Screening Methods

## Reliance on Barrier/Partition Controls

- Stand behind a physical barrier, such as a glass or plastic window or partition that can serve to protect the staff member's face and mucous membranes from respiratory droplets.
- Make a visual inspection of the child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.
- Conduct temperature screening (follow steps below)
- Perform hand hygiene
- Wash your hands with soap and water for 20 seconds. If soap and water are not available, use a hand sanitizer with at least 60% alcohol.
- Put on disposable gloves.
- Check the child's temperature, reaching around the partition or through the window.
- Make sure your face stays behind the barrier at all times during the screening.
- If you use disposable or non-contact (temporal) thermometers and you did not have physical contact with the child, you do not need to change gloves before the next check.
- If you use non-contact thermometers, clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each client. You can reuse the same wipe as long as it remains wet.

# Example 3 of Screening Methods

## Reliance on Personal Protective Equipment

- If social distancing or barrier/partition controls cannot be implemented during screening, personal protective equipment (PPE) can be used when within 6 feet of a child. However, reliance on PPE alone is a less effective control and more difficult to implement, given PPE shortages and training requirements.
- Upon arrival, wash your hands and put on a facemask, eye protection (goggles or disposable face shield that fully covers the front and sides of the face), and a single pair of disposable gloves. A gown could be considered if extensive contact with a child is anticipated.
- Make a visual inspection of the child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness, and confirm that the child is not experiencing coughing or shortness of breath.
- Take the child's temperature.
- If performing a temperature check on multiple individuals, ensure that you use a clean pair of gloves for each child and that the thermometer has been thoroughly cleaned in between each check.
- If you use disposable or non-contact (temporal) thermometers and did not have physical contact with an individual, you do not need to change gloves before the next check.
- If you use non-contact thermometers, clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each client. You can reuse the same wipe as long as it remains wet.
- After each screening, remove and discard PPE, and wash hands.
- Use an alcohol-based hand sanitizer that contains at least 60% alcohol or wash hands with soap and water for at least 20 seconds.
- If hands are visibly soiled, soap and water should be used before using alcohol-based hand sanitizer.

# Medical Screening

## Taking a client's temperature using a temporal thermometer.

Temporal thermometers use an infrared scanner to measure the temperature of the temporal artery in the forehead. Temperature takers should keep as much distance from clients as they can, wash their hands with soap and water or use alcohol-based hand sanitizer (at least 60% alcohol) regularly, and use gloves if available.

To use thermometer:

1. Turn on the thermometer.
2. Gently sweep the thermometer across the client's forehead.
3. Remove the thermometer and read the number:
  - **Fever:** Any temperature 100.4 F or greater is considered a fever.
  - **No fever:** People with temperatures at or below 100.3 F may continue into the shelter using normal procedures.
4. Clean the thermometer with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each client. You can reuse the same wipe as long as it remains wet.

### **1. Determine if the client has a fever, by:**

- Taking their temperature using a temporal thermometer (see box), and
- Asking "Have you felt like you had a fever in the past day?"

### **2. Ask the client:**

- "Do you have a new or worsening cough today?" cough or shortness of breath, sore throat, or systemic symptoms like myalgias or chill.
- Have you had close contact with any person with a confirmed COVID-19 illness.

### **3. Make a visual inspection of the child for signs of illness:**

- flushed cheeks
- rapid breathing or difficulty breathing
- fatigue, or extreme fussiness
- and confirm that the child is not experiencing coughing or shortness of breath.



# Needed Intake Products

