



wildsight
Revelstoke

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COVID-19 Guidance for Wild-In-Sight Camps

This guidance document is informed by [BC's Restart Plan: Next Steps to Move BC Through the Pandemic](#) and the [BC COVID-19 Go-Forward Management Strategy](#), and is also in keeping with [BC's COVID-19 Go-Forward Management Checklist](#) and information on [WorkSafe BC's COVID-19 Information and Resources](#) and [COVID-19 Frequently Asked Questions](#) websites.

This policy document is meant to provide interim guidance on the prevention of spread of COVID-19, while maintaining a safe and healthy environment for participants and staff. The document identifies key infection prevention and control practices to implement in child care settings, such as the Wild-In-Sight Program, and actions to take if participants or staff develop symptoms of COVID-19.

The Wild-In-Sight Program will adapt as much as possible to implement public health and infection prevention and control measures, including policies which require participants and staff to stay home when ill, practice physical distancing, minimizing physical contact, and promoting proper hand hygiene.

As such, if a participant is showing any [symptoms](#) of COVID-19, they will be asked to stay at home and a full refund will be given or credit will be applied to a future camp. Participants may return to the camp once they are assessed by their family physician or nurse practitioner and it is determined that they do NOT have COVID-19, and their symptoms have resolved.

All staff and participants will be screened prior to camp start.

COVID-19 and Children

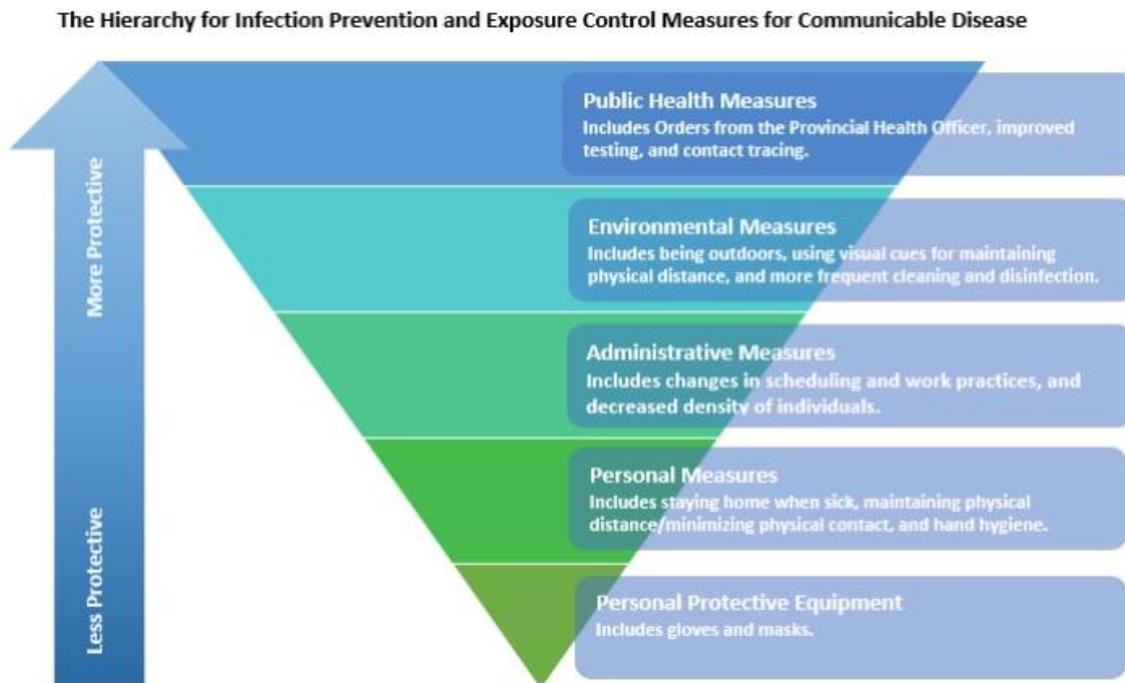
- COVID-19 virus has a very low infection rate in children. In B.C., less than 1% of children and youth tested have been COVID-19 positive. Most children are not at high risk for COVID-19 infection.
- Children under 1 year of age and older children with immune suppression and medical complexity are considered more vulnerable and at higher risk for illness (visit the [BCCDC Priority Populations](#) page for further details).
- *At this time, children who are considered more vulnerable will not be permitted to participate in the Wild-In-Sight Program.*
- Children and youth typically have much milder symptoms of COVID-19 most often presenting with low-grade fever and a dry cough. GI symptoms are more common over the course of disease, while skin changes and lesions are less common.
- Many children have asymptomatic disease. However, there is no conclusive evidence that children who are asymptomatic pose a risk to other children or to adults.
- Evidence indicates transmission involving children is primarily limited to household settings, and from COVID-19 positive adults to children. Most cases in children have been linked to a symptomatic household member.
- Clusters and outbreaks involving children and youth are unusual and tend only to occur in areas where there are high levels of community spread.
- Children are not the primary drivers of COVID-19 spread in child care facilities, schools or in community settings. Childcare facility closures and program cancellation have significant negative mental health and socioeconomic impacts on vulnerable children and youth.
- Prevention measures and mitigation strategies involving children and youth must be commensurate with risk.
- Adolescent children should physically distance themselves where possible when outside the family unit or household.
- For younger children maintaining physical distance is less practical and the focus should be on minimizing physical contact instead.



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Infection Prevention and Exposure Control Measures

Infection prevention and control measures can help create a safe environment for children and staff. The Hierarchy of Infection Prevention and Exposure Control Measures for Communicable Disease describes the measures that can be taken to reduce the transmission of COVID-19. Control measures at the top are more effective and protective than those at the bottom. By implementing a combination of measures at each level, the risk of COVID-19 is substantially reduced.



Public Health Measures are actions taken across society to limit the spread and reduce the impact of COVID-19. The Provincial Health Officer has implemented public health measures, including: prohibiting mass gatherings, requiring travellers to self-isolate upon arrival in B.C., effective case finding and contact tracing, and emphasizing the need for people to stay home when they are sick. **Environmental Measures** are physical changes in the setting that reduce risk of exposure by isolation or ventilation. Examples include being in outdoor spaces, having good ventilation and air exchange, using visual cues for maintaining physical distance, erecting physical barriers where appropriate and frequent cleaning and disinfection. **Administrative Measures** are measures enabled through the implementation of policies, procedures, training and education. Examples of these include changes in scheduling and work practices, and decreased density of individuals.

Personal Measures are actions individuals can take to both protect themselves and others. These include staying home when sick, physical distancing, minimizing direct physical contact, respiratory hygiene, and hand hygiene.

Personal Protective Equipment (PPE) is the last and least effective of the infection prevention and exposure control measure and should only be considered after exploring all other measures. PPE is not effective as a stand-alone preventive measure, should be suited to the task, and must be worn and disposed of properly. Outside of the health care settings, the effectiveness of PPE is generally limited to protecting others should you be infected.

Wildsight Revelstoke will be implementing a combination of these measures for the Wild-In-Sight Summer Program. Parents will be provided with more information upon registration of their child for participation in the Wild-In-Sight Program.

The following strategies will be implemented where possible during the Wild-In-Sight Program:

- Avoid close greetings (e.g., hugs, handshakes). Regularly remind children to keep “Hands to yourself”.
- Strive to minimize the number of different staff that interact with the same children throughout the day.
- Organize children into smaller groups and/or spread children out to minimize direct physical contact.
- Pick up and drop off will occur outside.
- Daily check at drop off may be conducted by asking parents and caregivers to confirm that their child does not have symptoms of common cold, influenza, COVID-19, or other respiratory disease. Parents / caregivers will be asked to assess their child daily for symptoms.
- Staff will assess themselves daily for symptoms
- If a parent, caregiver or staff member is unsure if they or a child should self-isolate, they should be directed to use the [BC COVID-19 Self-Assessment Tool](#), contact 8-1-1 or the local public health unit. They can also be advised to contact a family physician or nurse practitioner to be assessed for COVID-19 and other respiratory diseases.
- Rigorous hand washing / disinfection for a minimum of 20 seconds after touching common surfaces and before eating. Disinfectants will be provided by Wildsight Revelstoke.
- Participants and staff should not share food, drinks, and other personal items.
- The wearing of [masks](#) is a personal choice and will not be enforced during the Wild-In-Sight Program. In young children in particular, masks can be irritating and may lead to increased touching of the face and eyes.



Summary of Control Measures



1. STAY HOME WHEN SICK

All children and staff with common cold, influenza, COVID-19, or other respiratory diseases must stay home and self-isolate.



2. HAND HYGIENE

Everyone should wash their hands more often!

Thorough hand washing with plain soap and water for at least 20 seconds is the most effective way to reduce the spread of illness.



3. RESPIRATORY AND PERSONAL HYGIENE

Cover your coughs.

Do not touch your face.

No sharing of food, drinks, or personal items.



4. PHYSICAL DISTANCING AND MINIMIZING PHYSICAL CONTACT

Spread children out to different areas.

Take them outside more often.

Stagger lunch times. Incorporate individual activities.

Remind children, "Hands to Yourself!"



5. CLEANING AND DISINFECTION

Clean and disinfect frequently touched surfaces at least twice a day.

General cleaning of the centre should occur at least once a day.

Use common cleaning and disinfectant products.



Protocol for participant or staff with symptoms of COVID-19

Participant with Symptoms	Staff with Symptoms
<p>If child develops symptoms at home: parents / caregivers must keep their child at home until they have been assessed by a health care provider to exclude COVID-19 or other infectious diseases, AND their symptoms have resolved.</p> <p>If child develops symptoms during the Wild-In-Sight Program:</p> <p>Staff must take the following steps:</p> <ol style="list-style-type: none"> 1. Identify a staff member to supervise the child. 2. Identified staff member should immediately separate the symptomatic child from others in a supervised area until they can go home. 3. Contact the child's parent or caregiver to pick them up right away. 4. Where possible, maintain a distance of 2 metres from the ill child. If this is not possible, the staff member may use a mask if available and tolerated, or use a tissue to cover their nose and mouth. 5. Provide the child with tissues, and support as necessary so they can practice respiratory hygiene. 6. Avoid touching the child's body fluids. If you do, wash your hands. 7. Once the child is picked up, wash your hands. 8. If concerned, contact the local public health unit to seek further advice. <p>Parents or caregivers must pick up their child promptly once notified that their child is ill.</p>	<p>If staff develops symptoms at home: Staff must be excluded from work, stay home and self-isolate until they have been assessed by a health care provider to exclude COVID-19 or other infectious diseases, AND their symptoms have resolved.</p> <p>If staff develops symptoms during the Wild-In-Sight Program:</p> <p>Staff should go home right away where possible.</p> <p>If unable to leave immediately, the symptomatic staff person should:</p> <ol style="list-style-type: none"> 1. Separate themselves into an area away from others. 2. Maintain a distance of 2 metres from others. 3. Use a tissue or mask to cover their nose and mouth while they wait for a replacement or to be picked up. 4. Remaining staff must clean and disinfect the space where staff was separated and any areas used by them (e.g., office, bathroom, common areas). 5. If concerned, contact the local public health unit to seek further advice.
<p><i>If a child or staff member is assessed by their family physician or nurse practitioner and it is determined that they do NOT have COVID-19, they may return to child care once symptoms resolve.</i></p>	

