

Policy Name: Morning Health Checks (ongoing screening)

Purpose: Health checks will be completed once Laurel attendees are at Camp on a daily basis in an effort to identify anyone that might have a respiratory infection or might require additional consideration in order to continue participation in Camp activities.

Note: Policy will be reviewed and updated according to PA state law, CDC recommendations, and American Camp Association recommendations closer to the start of Camp.

Effective Date: 4/7/21 AK

Updated: 5/19/21 AK, Reviewed 7/13/21

Procedures:

1. Morning Health Checks will be completed as people enter the Dining Hall for breakfast at the Porch entrance with the double doors.
 - a. All Campers will need to complete a daily morning health check, usually around breakfast time.
 - i. At least one person (depending on number of people in Camp) will be stationed at the Enter door for the Dining Hall (porch side).
 - ii. Temperatures can be taken in cabins and reported as “No fever” as long as it is **below 100.4 degrees F** (CDC). If you did not take your temperature, that person will use a thermal scan thermometer to check it. Anyone with a fever will receive further questioning and follow up care from the Camp Nurse as well as isolating in a cabin until cleared for return to activities.
 - iii. You will need to answer screening questions: “Are you (or if answering for your Cabin/ children) feeling sick today? Any problems with coughing, diarrhea, vomiting, headache, loss of smell or taste, sore throat, congestion, muscle or body aches, or difficulty breathing?” Anyone stating YES, will be referred to the Camp Nurse for further follow-up and asked to isolate in their Cabin until cleared for return to activities.
 - iv. **Completing the Morning Health Check Form:**
 1. Check that you are using the correct form for the day of the week/ date as they will be predated for convenience.
 2. Put in your name(s) at the top of the form as the person doing the Checks for that date.
 3. Find the person’s name on the alphabetized Camper list.
 4. Circle **N** for no or **Y** for yes if the person has a fever. If he/ she did not take a temperature yet, use the available thermometer. **ONLY** the person(s) doing the checks should be handling the thermometer.

5. Refer to the laminated *Quick Reference List of COVID-19 Symptoms*, ask the person if he/ she has been experiencing any of them. Circle **Yes** if he/ she has any symptoms or **No** if no symptoms are present.
 6. If the person has a fever or any symptoms listed on the *Quick Reference List of COVID-19 Symptoms*, write in **YES** in the Nurse Needed box otherwise leave it blank. A person may also request to have a visit from the Camp Nurse, you may note that in the Comment section after marking YES.
 7. The Comment section is available if there are any Yes answers but does not need to be completed.
 8. A parent or caregiver may also complete the Health Check for any children staying in their cabin. If his/ her temperature was not taken in the cabin they will need to have it completed.
- v. This symptom list will be laminated and available for reference by the person(s) completing the Morning Health Checks and people coming into breakfast, so as to provide a visual aid and promote efficiency.
- vi. **ALL** Campers will need to be checked off **EACH** morning before Morning Program begins at 10:00am. Any Camper not checked in at breakfast in the Dining Hall will need to be located and screened.
- b. People working in the kitchen will be completing a daily log of symptoms checklist and temperature checks prior to starting to prepare food in the morning. A laminated *Quick Reference List of COVID-19 Symptoms* will be posted in the kitchen.
- i. **Completing the Morning Health Check Form- Kitchen Version:**
 1. First person in the kitchen for that day, check that you are using the correct form for the day of the week/ date as they will be predated for convenience.
 2. Place your initials in the first column. If you have the same initials as someone else, additionally use the first x2 letters of your last name.
 3. Use the available thermal scan thermometer in the kitchen and record your temperature in the Temperature column.
 4. Circle **N** for no or **Y** for yes if you have a fever.
 5. Refer to the laminated *Quick Reference List of COVID-19 Symptoms*. Circle **Yes** if you have any symptoms or **No** if no symptoms are present.
 6. If you have a fever or any symptoms listed on the *Quick Reference List of COVID-19 Symptoms*, write in **YES** in the Nurse Needed box otherwise leave it blank. You may also request to have a visit from the Camp Nurse, you may note that in the Comment section after marking YES.
 7. The Comment section is available if there are any Yes answers but does not need to be completed.
- c. You only need to check-in at **ONE** location. The person(s) doing the Morning Health Check is responsible for checking the initials on the Kitchen version to check those people off the main

form in the morning. Use the Comment section- write in “checked in at kitchen, no issues” OR “checked in at kitchen, Nurse needed”, according to how the person completed the form.

- d. The Camp Nurse will be consistently reviewing the Morning Health Check Forms and follow up with any Camper that needs to be seen.
- e. These health screens contain HIPPA-related information. This paperwork will be shredded as soon as Camp is over.

Quick Reference of COVID-19 Possible Symptoms

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. Anyone can have mild to severe symptoms. People with these symptoms may have COVID-19:

- 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
- Diarrhea

This list does not include all possible symptoms. CDC will continue to update this list as we learn more about COVID-19. (CDC, updated Feb. 22, 2021)

Sources: Field Guild for Camps on Implementation of CDC Guidance, Version 1.3, <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html> , Monongalia County Health Department, WV (7/12/21, 4:05pm) spoke with Ed Abbott 304-598-5100

	Y/ N	Yes/ No		
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Morning Health Checks- Kitchen

Date:

Initials	Temperature	Fever	Symptoms	Nurse Needed	Comments
		Y/ N	Yes/ No		
		Y/ N	Yes/ No		
		Y/ N	Yes/ No		
		Y/ N	Yes/ No		
		Y/ N	Yes/ No		
		Y/ N	Yes/ No		
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		Y/ N	Yes/ No		
		Y/ N	Yes/ No		