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Dear Lake County (IL) summer camp staff,

As your summer camps open this year, the Lake County Health Department (LCHD) will continue to offer support and guidance in responding to the COVID-19 pandemic. We want to help you protect the health of your staff and campers. LCHD community liaisons, Pat Brady ([pbrady2@lakecountyil.gov](mailto:pbrady2@lakecountyil.gov), 224-688-7630), Leia Mueller ([lmueller@lakecountyil.gov](mailto:lmueller@lakecountyil.gov), 224-383-4271), and Sean Kennedy ([skennedy@lakecountyil.gov](mailto:skennedy@lakecountyil.gov)) will assist you this summer to answer questions and provide you with resources and public health guidance. Please reach out with any questions.

On May 27, 2022 the Centers for Disease Control and Prevention (CDC) released information on [Operational Guidance for K-12 Schools and Early Care and Education Programs to Support Safe In-Person Learning](#) which can be applied to day camps with supplemental details also provided for overnight camps.

Vaccination remains the primary method of prevention of COVID-19 disease. The vaccines currently authorized in the U.S. have been shown to be effective among individuals who are up to date on vaccination, even against the more transmissible variants. Vaccines, along, with other mitigation layers such as masking, distancing, testing, cohorting, enhanced ventilation, cleaning, and disinfection can optimize the safety and well-being of camp staff and campers. The latest guidance ties the COVID-19 prevention strategies to COVID-19 Community Levels, which allows programs to adapt to changing local situations.

We hope to work with all camp organizations in Lake County this summer to ensure our campers and staff can safely participate in much-needed summer fun.

## Key Definitions

### **Point of Contact (POC)**

A designated camp employee responsible for contacting the Lake County Health Department (LCHD) hotline (847-377-8130, selecting option 5) or through the online reporting form ([RedCap Reporting Tool](#)) when a confirmed positive case of COVID-19 is identified. This person works with other camp personnel to identify potential close contacts at the camp and share information with LCHD. The Point of Contact is the liaison between the organization and LCHD.

### **Up to Date on Vaccination**

Two weeks after their second dose of the COVID-19 vaccine in the 2-dose primary series (or 1 dose in a 1-dose primary series) for 6 months–17 years of age. For individuals 18 years old and older, immediate completion of a primary series and after receiving booster shot(s), as appropriate for their age.

### **Partially/Unvaccinated**

Individuals who do not meet the definition for up to date on vaccination.

### **Close Contact**

An unvaccinated/partially vaccinated individual who was less than 6 feet from a person testing positive for COVID-19 for a cumulative of 15 minutes or longer (within a 24-hour period.) Promptly identifying and quarantining close contacts helps to slow the possible transmission of the virus. The camp should notify parents/legal guardians of attendees who are minors of their potential close contact in a timely fashion via phone call, email, or letter.

LCHD recommends that unvaccinated/partially vaccinated close contacts quarantine for 5 days from the last date they had contact with the infected person. The date of exposure to the case is day 0. It is highly recommended that all close contacts get tested for COVID-19 between days 5–7 after last contact and mask days 1–10 even after returning to camp on day 6 with negative test results. As an option, the camp can apply [Test to Stay](#) (TTS) for close contacts who meet criteria.

**Exception:** In the **K–12 indoor classroom** setting or a **structured outdoor setting** where mask use can be observed (i.e., holding class outdoors with educator supervision), the close contact definition does not apply to students who were between 3 to 6 feet of an infected student if both the infected student and the exposed student(s) correctly and consistently wore well-fitting [masks](#) the entire time. This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.

Individuals up to date on vaccination who are exposed to an infected person do not have to quarantine. After confirmation of their vaccination status, they may continue to participate in activities as long as they remain symptom free. It is recommended that persons who have been exposed, should monitor their symptoms for 10 days and be tested 5 days or later from the last date of exposure. It is also best practice to have these individuals mask during the 10 days after exposure. Please note, the LCHD may identify a special circumstance (e.g., outbreak) where quarantine and testing may apply.

### Contact of a Close Contact

An individual who has had contact with someone identified as a close contact to an infected person. In most instances, these individuals do not require quarantine or testing.

### Quarantine

It is highly recommended for someone identified as a close contact to [quarantine](#) (stay home and avoid all public activities) for 5 days and wear a mask when outside of the home for days 6 through 10 from the last date of contact with the positive case. A COVID-19 test (at-home antigen or lab-based antigen or PCR test) 5 to 7 days after exposure is suggested.

During quarantine, people should not have visitors. Children should not have playdates or attend parties or gatherings. People in quarantine also should not go shopping. The only time people in quarantine should go out is to seek emergency medical attention or a COVID-19 test.

Prior to the return to routine activity, the medical staff or designated COVID-19 administrator should follow up to determine that the person had no symptoms throughout quarantine and continue to monitor for symptoms days 6 through 10.

Children under 2 years old and those who have difficulty consistently wearing a well-fitting mask, should quarantine for 10 days.

### Quarantine Exemptions

- Individuals who tested positive for COVID-19 in the past 90 days from the date of exposure do not need to complete 5-day quarantine unless they develop symptoms. If symptomatic, they should test and

quarantine until they receive the result. Should the exposure fall outside of 90 days from the positive test date, the individual should quarantine.

- Individuals who are [up to date on vaccinations](#) do not have to quarantine if exposed to a person who is positive for COVID-19 except if determined by the LCHD.
  - Ex: Second dose of two-dose vaccine or first dose of the single dose of COVID-19 vaccine occurred on 6/1– This individual is partially vaccinated through 6/15. On 6/16, this individual will be exempt from quarantine if exposed to a positive COVID-19 individual.

### **Isolation**

[Isolation](#) is required for someone who has tested positive for COVID-19. This person must separate themselves from others completely for a minimum of 5 days and mask days 6 through 10 upon return. For times when the mask must be removed (mealtimes), they should be 6 feet away from others. Isolation may end after 5 full days if the person is fever-free for 24 hours without the use of fever-reducing medication and other symptoms have improved (loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation).

People in isolation should try to use a separate bedroom and bathroom, if possible, avoid shared living spaces, always stay 6 feet apart from others in the household, and wear masks anytime they are around others in their home. LCHD Case investigators may assist in providing a release date from isolation or instructions to families. Otherwise, [CDC's Quarantine and Isolation Calculator](#) may be used. There are NO exemptions for isolation periods.

### **Case Investigator**

An employee from LCHD assigned to the contact tracing investigation of someone who tests positive for COVID-19. This individual communicates with the positive case and provides guidance to the camp.

### **Contact Tracing**

LCHD Case Investigators may reach out to individuals who test positive for COVID-19 to interview the case, identify additional close contacts not yet identified by the camp, and provide public health recommendations. The POC works with other camp personnel to identify potential close contacts within the camp setting and camp activities. The POC shares their contact tracing information with LCHD for further investigation.

### **Incubation Period**

The period between exposure to a virus and the appearance of the first symptom. This period can range from 2 to 14 days.

### **Infectious Period**

The period in which the infected person (case) is considered contagious and able to spread the virus to others. The period is two days prior to the onset of symptoms or two days prior to the positive test date (if without symptoms) until the individual is released from isolation.

### **Symptomatic**

Exhibiting symptoms of an illness. Symptoms for COVID-19 may appear 2–14 days after exposure to the virus.

### **Asymptomatic Case**

A positive test for COVID-19 in an individual who exhibits no symptoms. COVID-19 can still spread even if a person is asymptomatic.

### **Cohort**

Cohorts (or “pods”) are small groups of campers and staff who stay together throughout the day or during overnight camps to minimize exposure to other people while at camp. Cohorts should have the same staff stay with the same group of campers and remain together as much as possible for the duration of camp. Camps that serve children across a wide range of ages or grade levels should consider creating cohorts.

### **Community Level**

A measure of the impact of COVID-19 illness on the health of people and healthcare systems in a specific community. Three factors determine the [COVID-19 Community Level](#)—new COVID-19 hospital admissions per 100,000 population in the past 7 days, the percent of staffed inpatient beds occupied by COVID-19 patients, and total new COVID-19 cases per 100,000 population in the past 7 days. Camps are encouraged to monitor the local community levels on the [CDC’s COVID-19 data tracker](#) and determine their optimal prevention strategies.

### **Diagnostic Testing**

Identifies individuals with current infection and should be performed on anyone that has signs or symptoms consistent with COVID-19 and/or after recent exposure to the virus causing COVID-19.

### **Screening Testing**

Identifies people with COVID-19 who do not have symptoms or exposures, so steps can be taken to prevent further spread. At medium or high Community Levels, screening testing should be implemented. Also, screening testing should be considered after returning from a break out being off-site for >24hrs, participating in indoor sports and extracurricular activities, or staff serving vulnerable campers (such as those with complex medical conditions).

### **Outbreak**

An [outbreak](#) is either:

- Multiple cases comprising at least 10% of students, teachers, or staff within a core group OR
- At least three cases within a specified core group. A core group are individuals who were together during an exposure period. For example, this could be limited to a classroom, a sports team, before/after school care, performing arts, or other groups and likely does not apply to the entire camp population.

### **Outbreak Testing**

Camps must conduct twice weekly testing of camp personnel who are unvaccinated/partially vaccinated and linked to an outbreak. Also, camps should conduct twice weekly testing of campers linked to the impacted cohort(s), depending on the circumstances, unless the local health department recommends otherwise.

Campers who have been identified as part of an outbreak should not participate in extracurricular activities outside of camp unless participating in outbreak testing. Testing should continue until the camp has completed one incubation period, or 10 days, without identifying any new cases. Acquire parental consent for student testing in advance to accommodate outbreak testing, should the need arise.

## Day to Day Operational Guidance

**Below are strategies to keep in mind for day-to-day camp activities:**

- **GET VACCINATED** If everyone at camp is vaccinated, it will limit severe disease and spread of COVID-19. Individuals aged  $\geq$  6 months are now eligible for vaccination.
- **MASK** Camp programs should be supportive of campers or staff who choose to wear a mask. The CDC recommends masking based on the burden of disease in the community by looking at community level.
  - **What to do based on community levels:** [COVID-19 Community Levels](#)

COVID-19 COMMUNITY LEVEL	PREVENTION STRATEGY FOR MASKING	PREVENTION STRATEGY FOR TESTING
<b>LOW</b>	Support those who choose to continue to mask	Ensure access to diagnostic testing for symptomatic persons and those exposed, and for continuity, camps may choose to continue to implement screening testing
<b>MEDIUM</b>	Person who are immunocompromised, at high risk for severe disease or have household or social contacts at high risk for severe disease, should be encouraged to talk to their healthcare providers about whether they need to wear a mask	Ensure access to diagnostic testing for close contacts and those exposed, and for continuity, camps may choose to continue to use screening testing
<b>HIGH</b>	Universal masking indoors in public, regardless of vaccination status, should be promoted. Persons who are immunocompromised should be encouraged to wear a mask or respiratory that provides greater protection.	Ensure access to diagnostic testing for close contacts and those exposed, and for continuity, camps may choose to continue to use screening testing

When community levels are high, people at risk for getting very sick with COVID-19 should also wear masks or respirators that provide greater protection such as N95 or K95s.

- **WASHING YOUR HANDS with soap and water can prevent spread of disease.** There should be monitoring and reinforcement of handwashing especially during key times (i.e., before and after eating). If handwashing is not possible, have alcohol-based hand sanitizer with at least 60% alcohol readily accessible for staff and campers.
- **MAINTAIN PHYSICAL DISTANCE**  
**Optimal distancing for campers and staff:**
  - $\geq 3$  feet distance with other campers in their cohort
  - $>6$  feet of distance with campers outside of their cohort
  - $>6$  feet of distance while eating/drinking without a mask (including with campers in their cohort)
  - $>6$  feet between campers and staff
  - Staff should maintain 6 feet of distance with other staff
- **COHORT** Summer camps are encouraged to cohort staff and camp attendees into smaller groups that stay together throughout the day based on Community Level. This helps to limit exposure to COVID-19 to a smaller group if someone attends camp that has COVID-19, or other communicable diseases.  
**What to do based on Community Levels:**
  - Low Community level: Cohorting is an option for camps to consider.
  - Medium Community level: Cohorting should be considered when planning.
  - High Community level: Cohorting is strongly encouraged to limit the number of people who come in contact with each other.
- **VENTILATION** Summer camps should optimize indoor ventilation and enhance indoor air quality to prevent spread of the virus through the air. CDC's [Interactive School Ventilation Tool](#) may assist in optimizing air circulation. Consider the following preventative actions:
  - HVAC System modifications:
    - Make sure your HVAC are serviced and up to code on requirements ([ASHRAE Standard 62.1](#)).
    - Have your HVAC system set to bring in as much outdoor air as it will safely allow.
    - Increase the HVAC's total airflow supply to occupied spaces.
    - Disable demand-controlled ventilation controls.
    - Switch fan control switch to "On" from Auto for simple thermostat-controlled HVAC systems.
    - Consider running the HVAC system at maximum airflow for 2 hours before the building is occupied.
  - Use of Outdoors
    - If safe to do so, open windows and doors, even just cracking open a window. Do Not open if it poses a safety or health risk.
    - Use child-safe fans to blow air into open windows or doors.
    - Have activities outdoors when circumstances allow.

- Air Filtration
  - Purchasing of MERV-13 air filters and/or portable air cleaners with high efficiency particulate air (HEPA) filters.
  - Ensure filters are sized, installed, and replaced according to manufacturer’s instructions.
  - Use exhaust fans in kitchen and bathrooms.
  - Consider ultraviolet germicidal irradiation (UGVI) as a supplemental treatment. Consult a qualified professional to design and install.

**What to do based on Community Levels:**

- Low and Medium Community levels: Increase outdoor intake and improve air filtration
- High Community level: Hold activities outside if feasible.

Practicing these precautions during your camp sessions will help reduce the spread of COVID-19 and allow for the kids to stay at camp. Please note LCHD does not provide recommendations for or against any manufacturer or product.

**CLEAN AND DISINFECT** routinely to help maintain healthy facilities Remember to clean high-touch surfaces at least once a day or as often as determined is necessary. Examples include shared pens, counters, tables, doorknobs, light switches, handles, stair rails, desks, keyboards, phones, toilets, faucets, and sinks.

If there has been a sick person or someone who tested positive for COVID-19 in your facility within the last 24 hours, you should clean and disinfect the space.

[How to Protect Yourself & Others | CDC](#)

[CDC Cleaning and Disinfecting Guidance](#)

[CDC Building and Facility Disinfecting](#)

[Environmental Protection Agency List of Disinfectants for COVID-19](#)

## Considerations for Overnight Camps

When staff are away from camp (for example, during days off), they should choose safer activities and follow all prevention measures (e.g., masking and social distancing).

**Vaccinations:**

Encourage vaccinations in campers and staff so they do not have to quarantine if exposed, allowing more kids to enjoy the camp experience.

**Self-Monitoring for Symptoms**

If there is a known exposure to one of your staff or campers, your campers should self-check for symptoms every morning to ensure they are without symptoms. If having symptoms, campers should report to nurse or staff.

### Screening Testing:

- Consider having staff provide test results or perform a screening test on-site prior to starting work after leaving the camp or after returning from days off.
- If campers are coming from different regions of the state or out of state a pre-arrival test is recommended

### Diagnostic Testing:

- Campers and staff members who have [symptoms of COVID-19](#) should get [tested](#) and isolate away from other people until they receive their test results.
- If testing is not available on site, people with symptoms should be referred for testing at a nearby [testing site](#).
- Campers and staff with symptoms of COVID-19 who cannot be tested should follow [isolation](#) guidance and isolate separately from people with laboratory confirmed COVID-19.

### Isolation

- Work to identify an isolation room or area to separate individual(s) who exhibit COVID-like symptoms from others.
- Anyone who tests positive for COVID-19 should isolate away from others for at least 5 days and follow [isolation](#) guidance. After 5 days, they may resume activities as long as fever-free without use of medications, symptoms have improved, and they wear a well-fitted mask days 6 through 10.
- Campers and staff can isolate at the camp if there is separate housing and supervision available for managing isolation with protocols that prevent transmission.
- Multiple campers or staff members who have tested positive for COVID-19 can be housed together to complete at least 5 days of isolation.
- If it is not possible to separate campers who test positive for COVID-19 from others, they should be sent home, if possible, to complete the 5-day isolation period. If the camper is sent home, members of their household should follow the [Ongoing Exposure FAQ](#) for information on how to manage COVID-19 for people who live together and cannot be separated.
- If the camp has a nurse or other healthcare provider, they should be provided appropriate personal protective equipment, including N95 respirators, to wear when caring for sick people.

### Quarantine

- Individual(s) who are unvaccinated/partially vaccinated and determined to be a close contact to an infected person, will need to quarantine for 5 days. After 5 days, they may resume activities as long they are asymptomatic and can wear a well-fitted mask days 6 through 10.
- If the camp does not have an area to separately quarantine those exposed, individual(s) should be sent home. Please note this area MUST be separate from the area designated for isolation.
- [Test to Stay](#) is an option for camps if exposed individuals are symptom-free, masked, and test at least twice within the week after exposure.
- Children under 2 years old and those who have difficulty consistently wearing a well-fitting mask, should quarantine for 10 days.

## Outbreaks

- Isolate your positive cases from the remaining campers.
- Test the remaining campers that may have shared a cabin, meal, activity with your positive case(s).
- Masks are strongly recommended during the Outbreak period or until there are no additional campers that converted to positive.
- A testing cadence of Monday and Thursday is best practice for confirming any additional positive campers.
- Reporting to the Lake County Health Department is required. Please use the [RedCap](#) link, contact the Liaisons, or call 847-377-8130, select option 5, and we will reach out to you.

### [Frequently Asked Questions for Directors of Overnight Camps](#)

### [Standard and Transmission-Based Protocols for Caring for the sick -- CDC](#)

### [What Healthcare Personnel Should Know About Caring for Patients with Confirmed or Possible COVID-19 Infection - CDC](#)

## Travel Considerations

Request that campers, their families, and camp staff follow CDC's guidance for travelers before camp arrival, or following trips taken during the camp period, to reduce exposure to COVID-19 ([Guidance for Travelers - CDC](#)). For more information on state and local recommendations on travel destinations please refer to the [State and Local Recommendations or Requirements for Travel - CDC](#).

### Field Trips and Trips Outside of Camp

Participating in activities that take place outside of camp increase the risk of introducing COVID-19 into the population. Campers and staff who are unvaccinated/partially vaccinated, should avoid group events, gatherings, or meetings where physical distancing between people cannot be maintained.

If taking trips outside the camp, it is safer for campers and staff who are unvaccinated/partially vaccinated to visit outdoor locations, away from other people. Some examples include hiking trips and visits to beaches or lakes. If taking trips to indoor locations, campers and staff who are not fully vaccinated should stay within their cohort, wear a mask, and maintain physical distance of at least 6 feet from anyone outside of the cohort.

If the camp location is left for 24 hours or more, screening testing upon return should be considered. Please refer the [Community Levels](#) to follow the appropriate recommendations.

## Symptom Screening for Campers and Staff

Strongly encourage parents and caregivers to monitor children at home for signs of infectious illness or COVID-19 every day, for 7–14 days before camp. Staff should self-monitor prior to coming into work every day. If staff leave the site or return after days off, consider screening testing with at-home test or on-site. Campers should self-monitor for symptoms every day while participating in camp. Encourage staying home when campers or staff are sick and to seek medical care as needed. Parents of campers or staff that have tested positive or been

exposed to a positive testing individual/determined to be a close contact should be asked to notify the program right away. If at camp, and an individual experiences symptom, should notify the camp administration.

Please use the [IDPH School Decision Tree](#) when considering exclusion of campers or staff.

## Protocol for COVID-19 Symptoms at Camp

If a camper or staff member reports **ONE** or more COVID-19 symptoms listed in the [IDPH School Decision Tree](#) during the day or camp activity:

1. Isolate the person from others in a separate location/cabin until a parent can pick the camper up or the staff is able to leave. For campers, ensure a staff person can supervise them but stays 6 feet away and is masked.
2. Notify the designated COVID-19 POC who will assess the situation and determine if the person should be sent home or remain, and to assist with identification of close contacts.
3. If a symptomatic child or staff tests negative and has no other risk factors (i.e., close contact of someone with COVID-19 or symptomatic household member), a healthcare provider note is NOT needed to return to camp. **However, if a symptomatic child or staff is a close contact of someone with COVID-19, they should complete their 5-day quarantine and mask upon return for days 6 through 10 even if they have a negative test for COVID-19.**

## Reporting Positive Cases

Under the Communicable Disease Code COVID-19 is a reportable disease (see 690.361). Schools are responsible for reporting positive cases to LCHD in a timely manner (see 690.200). [PART 690 CONTROL OF COMMUNICABLE DISEASES CODE : Sections Listing \(ilga.gov\)](#)

## Contact Tracing Checklist for Nurses and Administrators

What to do if a camper or staff reports a positive test result or goes home with symptoms:

1. **Designate a COVID-19 POC for contact tracing investigations.** This should be a nurse or administrator at the camp location.
2. Lake County has a reporting system, [REDCap](#), that provides for the rapid reporting of case information and ensures confidentiality for individuals. The REDCap reporting tool is a secure digital platform where school staff can report positive cases. It is an important process to assure prevention of additional cases of COVID-19 in our county. Once you have reported the exposure, one of our Community Liaisons: Pat Brady, Leia Mueller, or Sean Kennedy will reach out to you to assist with any further needs and provide guidance.

If a child or staff is a suspected case of COVID-19 or reports they tested positive, LCHD may request the camp gather information to assist in contact tracing. An individual is considered infectious starting from two days prior to their symptom onset or date of first positive test (whichever is first).

Be prepared to:

- Conduct an internal review with campers or staff to determine cohort groups, seating locations, and activities/whereabouts of the positive case before, between, and after activities.
- Ask the camper or staff about close contacts at camp while in attendance during their infectious dates. These could be staff or campers sitting within 6 feet and close friends.
- If requested, gather names and phone numbers for parents of close contacts to share with health department contact tracers.
- LCHD recommends that unvaccinated/partially vaccinated close contacts quarantine for 5 days at home or in separate camp area and mask days 6–10 upon resuming activities. These campers may also qualify for [TTS](#) if they remain asymptomatic, mask, and test at least twice within the week after exposure.
- Use the provided template letters in the appendix to inform parents of campers of a positive case at camp, while protecting confidentiality of those infected, and a letter informing parents/guardians that their campers were identified as close contacts and should either be quarantined or participate in [TTS](#).
- An Excel spreadsheet listing identified close contacts (if applicable) and parent contact information is provided in the [LCHD REDCap reporting tool](#) and can be uploaded as an attachment when reporting a positive case.

## REDCap Checklist

When submitting a [REDCap](#), include as much of the following information as possible to assist LCHD in providing the organization with appropriate guidance:

1. Point of Contact (POC) Name, phone number, & email address
2. Camp name, address, and location (town)
3. Full name (of the positive case)
4. Date of birth of the case
5. Vaccination date(s) for the case (if applicable)
6. Parent guardian/name of the case (if applicable)
7. Phone number of parent/guardian of the case (if applicable)
8. Last date that the positive case attended camp
9. Date of Symptom onset/Positive test of the case (if asymptomatic)
10. Type and details of how the case exposed others (i.e., which cohort were they a part of, what group activities or sports did they participate in, and if attended a party, etc.)
11. Personal Protective Equipment (PPE) used by the case and close contacts (i.e., were campers and staff wearing face coverings/masks, face shields, etc.)
12. How did the organization respond (i.e., were any close contacts sent home to quarantine for 5 days or did the organization implement a biweekly testing cadence on Mondays & Thursdays along with masking for 10 days post exposure while on site)?
13. Information on workplaces or activities (i.e., what other activities does the staff instruct)?
14. Names and phone numbers of close contacts or organizers (close contact information can be compiled into an excel spreadsheet and uploaded into the REDCap). Please indicate where the individual came into contact with the positive case (i.e., same cohort or activity, etc.).

## Early Care Education (daycare) and Younger Aged Campers

For guidance related to daycare at camp and elementary school aged campers please refer to the [Illinois Licensed Daycare Guidance](#). Here are some key points to remember:

### Isolation

Use [CDC's Quarantine and Isolation Calculator](#) to determine date of return to activities. Day 0 is the first day of symptoms or a positive viral test. If an individual tests positive for COVID-19, they must isolate for at least 5 days regardless of vaccination status. If symptoms improve and there is no fever for 24 hours (without fever-reducing medications), the positive individual can resume activities on day 6 only if a mask can be properly worn for days 6–10. If masks cannot be worn properly, the individual must complete 10 days of isolation. If their symptoms do not improve after 5 days, they must continue to isolate and contact their healthcare provider. Individuals cannot test out of isolation period. This is applicable to both students and staff.

### Quarantine

Use [CDC's Quarantine and Isolation Calculator](#) to determine date of return to activities. A camper or staff member who is unvaccinated/partially vaccinated and exposed to COVID-19 should stay home and away from others for at least 5 days and can resume activities on day 6 only if they remain asymptomatic and a mask can be properly worn for days 6–10. The date of exposure to a COVID-19 positive individual is considered day 0. In general, even if a close contact does not develop symptoms, they should test at least 5 days after last contact with someone with COVID-19. If symptoms develop in the 10 days after exposure, the person should stay home and get tested immediately. If there is a positive test, the person must begin isolation.

Children under 2 years old who are unable to mask or those who have difficulty wearing a mask consistently should quarantine for 10 days.

A student or staff member up to date on vaccination or those who have tested positive for COVID-19 within the last 90 days, do not need to quarantine but testing once 5 to 7 days after exposure is recommended. For more information on isolation and quarantine in a daycare setting, please visit [CDC's Operational Guidance for K-12 Schools and Early Care and Education Programs to Support Safe In-Person Learning](#).

## COVID-19 Testing Basics and Guidance

Someone who has tested positive does not need a negative test to return to activities. Some people continue to test positive long after their infectious period. Instead, people who have tested positive can return to activities once it has been 5 days and mask days 6 through 10, since their symptom onset or positive test, *AND* they have seen symptom improvement *AND* have been fever-free (<100°F) without fever-reducing medications for 24 hours.

What are the different types of tests?

### 1. [Molecular Test](#)

- Also known as viral test, molecular test, nucleic acid amplification test, PCR (polymerase chain reaction) test etc.
- Administered through a nasal or throat swab (most tests); some are saliva specimens
- Time to result = 1 to 7 days; could be a rapid test resulting in minutes to hours
- Accuracy: highly accurate and usually does not need to be repeated

## 2. Antigen Test

- Also known as BinaxNow, antigen, at-home tests etc.
- Administered through a nasal or throat swab
- Works best on symptomatic individuals
- Time to result = within an hour; could be a rapid test resulting in minutes to hours
- Accuracy: When a person has symptoms, positive results are usually highly accurate but negative results may need to be confirmed with a molecular test. In asymptomatic persons, either test result may need confirmation with a molecular test.
- Parents/guardians providing at-home testing should be provided the following training video on how to correctly administer the test: [https://www.youtube.com/watch?v=qBt\\_H4Gc-rU](https://www.youtube.com/watch?v=qBt_H4Gc-rU)

*Note: LCHD will offer guidance on the POSITIVE result or interpretation of multiple tests with differing results.*

Outbreak testing is strongly recommended for students in camps in outbreak status and required for unvaccinated/partially vaccinated camp personnel and campers who are included in the outbreak definition established by public health authorities ([see above Key Definitions, outbreak testing](#)).

## Test to Stay (TTS)

Test to Stay (TTS) programs are an alternative to traditional at-home quarantine for close contacts who are not up to date with COVID-19 vaccines. TTS combines contact tracing and frequent testing to allow those who have been exposed to attend camp in person. CDC continues to recommend TTS as an important strategy camps should consider in order to support in-person learning. **TTS strategies have not yet been evaluated by CDC in ECE programs.** See CDC's [What to Know About COVID-19 Testing in Schools | CDC](#) for more details.

- TTS is a strategy to keep children and staff, identified as close contacts, within their camp environment by testing the child more frequently after an exposure.
- A twice a week testing cadence can be applied to allow your campers to continue participation. Campers should be tested twice (typically Mondays and Thursdays) after an exposure using testing onsite by camp staff or by parents with at-home COVID-19 test kits. Consider developing a process for on-site testing or for parents at-home testing.

Example of process to submit test results:

- Place your completed test on a piece of plain paper with the test result visible.
- Write your name and date of birth on the paper.
- Include the date and time the test was taken and the test result.
- Take a picture of the results and send to your email.
- Upload the picture to school/camp electronic platform or send securely via email to camp administration.

- Throughout the 5–7 days of TTS testing, if camper/staff tests negative and for an additional 5 days if camper/staff remains asymptomatic (total 10 days), masks should be worn while participating in group activities or when within 6 feet of individuals.
- Test to Stay may require additional staff time to potentially administer tests and read test results (if performing on-site testing), contact tracing, and documentation and reporting of contact tracing and test results to the LCHD. Close contacts not meeting TTS eligibility criteria or parents who do not consent for testing of close contacts will be recommended to quarantine at home for at least 5 days and mask on days 6–10 upon return to camp. If unable to mask, they are asked to quarantine for 10 days.
- At-home test kits can be used by parents/guardians with appropriate reporting instructions implemented by camp administration.
- If a new camper/staff test positive during the TTS cadence, the testing clock starts over for those re-exposed with the addition of those newly exposed to the new case.
- Please report all cases and the application of TTS to LCHD via [REDCap](#).

## Available Testing Resources

The federal government is now **providing free**, at-home COVID-19 antigen tests for households to perform self-testing with at-home test kits. At-home tests can be obtained for free using the following link:

<https://www.covid.gov/tests>. Tests are available in limited quantities to each member of a household.

Additionally, families can purchase tests at retail pharmacies or have it ordered through medical providers as a lab-based test. Additionally, IDPH provided a one-time opportunity for camps to order at-home test kits in bulk to be used as point-of-care onsite by camp administration. Camps were provided the information prior to start of camp season on how to order. If experiencing a shortage of test kits, please contact the LCHD Liaisons for further assistance.

## Ticks and Mosquito Season

Ticks and mosquitos are common in Lake County and can carry bacteria and viruses causing many diseases including Lyme Disease and West Nile Virus. When staff and campers spend time outdoors, it is important to prevent tick and mosquito borne diseases by **wearing repellent, checking for ticks daily, showering soon after being outdoors, and calling your doctor if you get a fever or rash following a tick bite**. Check out the Lake County Health Department (LCHD) website for tips on preventing tick and mosquito bites this summer at [Fight-the-Bite](#). Additionally, LCHD has tick identification cards available by request for educational purposes. If interested in tick identification cards, please reach out to the LCHD Ecological Services Program Coordinator at 847-377-8009 or [abartolai2@lakecountyil.gov](mailto:abartolai2@lakecountyil.gov).

We thank you for your continued efforts in keeping our community safe!

Have a fun and safe Camp Season!

## Resources

1. [Operational Guidance for K-12 Schools and Early Care and Education Programs to Support Safe In-Person Learning | CDC](#)
2. [Frequently Asked Questions for Directors of Overnight Camps and the Interactive School Ventilation Tool.](#)
3. [Overview of Testing for SARS-CoV-2 \(COVID-19\) - CDC](#)
4. [What to Know About COVID-19 Testing in Schools | CDC](#)
5. [Coronavirus Testing Basics - FDA](#)
6. [School-Guidance-Decision-Tree 3.22.2022.pdf](#)
7. [CDC Cleaning and Disinfecting Guidance](#)
8. [CDC Building and Facility Disinfecting](#)
9. [Environmental Protection Agency List of Disinfectants for COVID-19](#)
10. [Illinois Daycare Guidance – DCFS](#)
11. [Standard and Transmission-Based Protocols for Caring for the sick -- CDC Guidance for Travelers - CDC](#)
12. [State and Local Recommendations or Requirements for Travel - CDC Redcap Reporting Tool](#)
13. [COVID-19 Community Levels | CDC](#)
14. [Frequently Asked Questions for K-12 and Early Care and Education \(ECE\) Settings: Information for School and ECE Administrators, Teachers, Staff, and Parents | CDC](#)

## Appendix A. Customizable Contact Tracing Notification Letters

Camp administrators can use the sample letters below to notify parents and guardians about camp-associated COVID-19 cases, outbreaks, and close contact exposures. They can also use these letters to offer guidance on isolation for parents and guardians of students with a confirmed or suspected COVID-19 case. Customize the letters as needed to include information specific to your camp. Consult with your legal counsel and state, tribal, local, or territorial health department to ensure that these letters comply with state and local laws, regulations, and policies. Highlighted content indicates information that may be tailored based on a camp needs.

[General Case Notification Letter](#)

[Close Contact Notification Letter](#)

[Isolation Guidance Letter](#)

## Appendix B. Template Letter to Parents for Test to Stay

We are writing to inform you that an individual at [insert organization/camp] tested positive for COVID-19 on [DATE]. This individual is now in isolation.

We, [Organization/camp], are closely working with the Lake County Health Department (LCHD) to prevent further spread within our organization and community. If you do not receive further communication from our organization or LCHD, your child has not been identified as a close contact and can continue to attend camp. If you are contacted by us or LCHD, we ask that you please provide information to help prevent the spread of COVID-19 in our community.

To prevent further spread of the disease, [organization/camp name] is taking the following steps:

- Placing unvaccinated/partially vaccinated staff and students who are close contacts to the COVID-19 case in quarantine for 5 days, mask upon return to activities days 6--10 [OR enrolling in Test to Stay as an alternative to quarantine].
- All close contacts enrolled in Test to Stay will be requested to mask while participating in group activities.
- Ongoing symptom monitoring of campers and staff for signs symptoms of illness and evaluation and testing of symptomatic individual(s) to promptly identify additional cases.
- Campers and staff who are ill with COVID-like symptoms will promptly be placed in a separate supervised area away from others until they can be sent home.

- Conducting a deep clean and disinfection of the areas impacted by potential exposure to the COVID-19 virus. We are continuously sanitizing high-touched surfaces including door handles, equipment, sink faucets, etc.
- Other actions: \_\_\_\_\_

We understand privacy concerns.

The Lake County Health Department advises the following in and outside of camp:

- Remember that wherever you go you should always follow public health guidelines, including the 3 Ws to reduce your risk of getting and spreading COVID-19

**Wear** a mask

**Wash** your hands

**Watch** your distance

- Stay at home if you are sick, except to receive medical care, and avoid close contact with people who are sick.
- Get the COVID-19 Vaccine!
- If you are an older adult or have a serious medical condition like heart disease, diabetes, lung disease or have a weakened immune system contact your doctor to consider COVID-19 treatment.
- If you do not have a doctor or primary care provider, you may contact the Lake County Health Department at (847) 377-8800.

Sincerely,

[Name]

[Organization name]