

East Carolina Council
Camp Use Acknowledgement & Agreement
(updated 8/6/2020)

We have seen what happens when people do not follow safety procedures. **Strict adherence to these procedures must be followed for the safety of all.** It is important to understand the risks and know how to be as safe as possible.

People at increased risk of severe illness from COVID-19, and those who live with them, should not participate as recommended by the BSA. People who do participate should consider their level of risk before [deciding to go out](#) and ensure they take steps to [protect themselves](#). Avoid activities where taking protective measures may be difficult, such as activities where social distancing can't be maintained. **Everyone should take steps to prevent getting and spreading COVID-19** to protect themselves, their communities, and people who are at increased risk of severe illness.

In general, **the more people you interact with, the more closely you interact with them, and the longer that interaction, the higher your risk of getting and spreading COVID-19.**

COMMUNICATION. We have discussed Scouting activities and the safety procedures we are taking with our chartering organization and our Scouting parents.

TRANSPORTATION. Have all riders (including adults and children eleven years or older) wear face coverings when they are or may be within six (6) feet of another person.

Have adequate supplies to support healthy hygiene behaviors (e.g., hand sanitizer with at least 60 percent alcohol for safe use). Separate campers with as much space as the vehicle allows while maintaining safe transportation practices. Consider keeping windows open while the vehicle is in motion to help reduce spread of the virus by increasing air circulation, if appropriate and safe.

MONITORING.

Conduct a pre-departure screening with all participants before leaving using the BSA's Model Pre-Event Medical Screening Checklist. Maintain a copy of the screening checklist for one month.

Maintain a roster of all attendees for one month. Conduct daily [symptom](#) screening (use the attached NC Non-Health Care Worker Symptom Screening Checklist interview questionnaire).

- Immediately [isolate](#) sick campers and staff away from others.
- If a camper or staff member has been diagnosed with COVID-19 or is presumed positive by a medical professional due to symptoms, the camper or staff member should be isolated away from other campers and staff.
- Notify parents immediately to pick up the Scout from the campout.
- If after the campout it is determined someone is positive for the COVID-19 virus, notify their primary care physician and the council office. Work with local health departments to identify close contacts of confirmed cases in a camp setting.

CLOTH FACE COVERINGS. Have all adults, and children eleven years or older on site, wear a face covering when they are or may be within six (6) feet of another person, unless the person (or family member, for a child) states that an exception applies. Visit [NCDHHS COVID-19 response site](https://files.nc.gov/covid/documents/guidance/NCDHHS-Interim-Guidance-on-Face-Coverings.pdf) for more information about the [face covering guidance](#).
<https://files.nc.gov/covid/documents/guidance/NCDHHS-Interim-Guidance-on-Face-Coverings.pdf>

Campers younger than 11 should wear face coverings if they can reliably wear, remove, and handle masks following CDC guidance throughout the day. Individuals should be reminded frequently not to touch the face covering and to wash their hands.

CLEANING & HYGEINE. Perform ongoing and routine environmental cleaning and disinfection of high-touch areas (e.g., doors, doorknobs, rails) with an [EPA approved disinfectant for SARS-CoV-2](#) (the virus that causes COVID-19) and increase disinfection during peak times or high camper density times.

- Units will be assigned bathrooms to avoid congregating and contact with other units.
- To avoid unintended spread of the virus, avoid activities with other units.

TENTING. The key is to keep youth and adult campers 6 feet apart. Consider individual tents.

- Scouts can bring their own ideally or use unit tents. Place tents with doors facing opposite directions to maintain social distancing when entering / exiting tents.
- Hammocks
- Wilderness survival shelters
- If sharing a tent is the only option, hang a barrier (poncho, bed sheet) separating the sides of the tent. Have campers sleep head to toe.
- For youth protection, the buddy system is still in effect.

Retain a copy of these procedures, and the supporting checklist, for the duration of the campout and for an additional month following the campout.

I have read, understand, and agree to follow all guidance from the CDC, State of North Carolina, the BSA, and East Carolina Council.

Signature

Printed name

Date

Model Pre-Event Medical Screening Checklist

Use this checklist to assist in identifying potentially communicable diseases before event participation.

The intent of this checklist is to review with each youth and adult participant their current health status, both before departure and upon arrival at the event. Anyone entering a camp or event — including visitors, vendors, etc. — should be screened using this checklist.

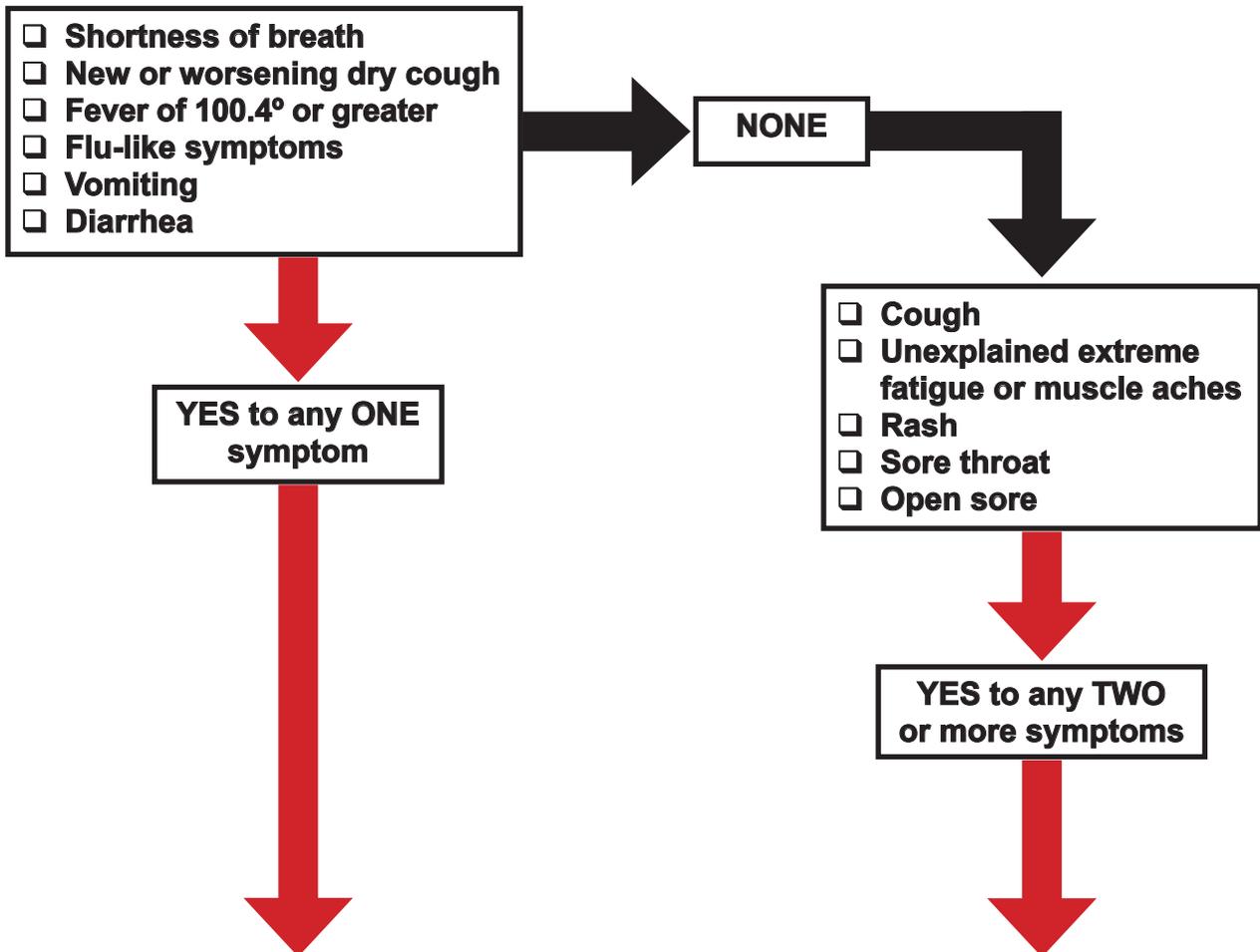
Councils should customize with input from their council health supervisor and local health department.

- Yes No Have you been in contact with anyone who has COVID-19 or is otherwise sick?
- Yes No Have you or anyone you have been in close contact with traveled on a cruise ship, internationally, or to an area with a known communicable disease outbreak in the last 14 days?

If the answer is “yes” to either of these questions, the participant must stay home.

- Yes No Are you in a higher-risk category as defined by the CDC guidelines?
If the answer is “yes” to this question, we recommend that you stay home. Should you choose to participate, you must have approval from your healthcare provider and then proceed to the symptom decision tree below.

If the above answers are “no,” proceed to this symptom decision tree.



Unit Campout Roster

Pack / Troop / Crew / Ship _____

Campout location: _____

Campout date: _____

	First name	Last name
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
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23	_____	_____
24	_____	_____
25	_____	_____

Non-Health Care Worker Symptom Screening Checklist

1. Have you had close contact (within 6 feet for at least 15 minutes) in the last 14 days with someone diagnosed with COVID-19, or has any health department or health care provider been in contact with you and advised you to quarantine?
 - Yes
 - No
2. Since you last worked, have you had any of these symptoms?
 - Fever
 - Chills
 - Shortness of breath or difficulty breathing
 - New cough
 - New loss of taste or smell
3. Since you last worked, have you been diagnosed with COVID-19?
 - Yes
 - No

If a worker has been diagnosed with, has symptoms of, or has been exposed to COVID-19, they should go home, stay away from other people, and call their doctor or local health department

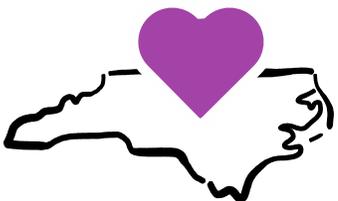
If a worker is diagnosed with COVID-19 based on a test or their symptoms or does not get a COVID-19 test but has had symptoms, they can return to work when they can answer YES to ALL three questions:

- Has it been at least 10 days since you first had symptoms?
- Has it been at least 1 day since you've had a fever (without using fever reducing medicine)?
- Have your other symptoms improved?

If a person has been diagnosed with COVID-19 but does not have symptoms, they can return to work when 10 days have passed since the date of their first positive COVID-19 test, assuming they have not subsequently developed symptoms since their positive test.

If an employee has had a negative COVID-19 test, they can return to work once they have no fever without the use of fever-reducing medicines and have felt well for 24 hours.

If a person has been determined to have been in close contact with someone diagnosed with COVID-19, they can return to work 14 days since the last known contact, unless they test positive. In which case, criteria above would apply. They must complete the full 14 days of quarantine, even if they test negative.



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Learn more at nc.gov/covid19.



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Last updated: 07/23/2020



Requirements for the Use of Face Coverings and Masks

August 3, 2020 (revised from June 30, 2020)

North Carolina took early and aggressive action to slow the spread of COVID-19 in our state. These actions prevented our healthcare systems from being overwhelmed and provided valuable time to build our state's capacity to respond to this crisis. Now, we are seeing increasing cases and hospitalizations from COVID-19 across our state. With more North Carolinians leaving their homes as we ease restrictions, the risk for COVID-19 exposure and infection increases.

We have important goals: to protect our families, friends and neighbors from getting seriously ill, to restore our economy and get people back to work, and to get our children back to school. To attain these goals, we must remain vigilant and continue to work together to combat the spread of COVID-19 by taking preventive actions to slow the spread of COVID-19. The preventive actions include the 3 Ws: **Wear a cloth face covering.** **Wait 6 feet apart from others.** **Wash your hands.**

Over the past few months, we have learned a lot about COVID-19 transmission. We know now that people who are infected, but do not have symptoms, can infect others by spreading respiratory droplets through activities like speaking, coughing, laughing, and singing. New scientific evidence suggests that public use of face coverings can help reduce disease transmission. Face coverings are not a substitute for other important prevention practices and should be used **in addition** to staying 6 feet apart, washing hands, and staying home when ill.

This document updates existing NC DHHS guidance for the use of face coverings by the general public when outside the home. It mandates that face coverings be worn statewide as outlined below. It is not a substitute for existing guidance about social distancing and handwashing.

Guidance for People

People must wear face coverings when in public places, indoor or outdoor, where physical distancing of six (6) feet from other people who are not members of the same household or residence is not possible. These settings include, but are not limited to:

- Inside of, or in line to enter, any indoor public space, including public schools;
- Waiting for or riding on public and private multi person transportation, including but not limited to buses, taxis, ride sharing, private care service, vans;

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- Engaged in work, whether at the workplace or performing work off-site, when they are or may be within six (6) feet of other people, including working in or walking through common areas, such as lobbies, hallways, stairways, elevators, and parking facilities;
- Obtaining services in a healthcare setting;
- While outdoors in public spaces when maintaining a physical distance of 6 feet from persons who are not members of the same household or residence is not feasible.

This restriction does not apply to persons while inside their residence or the personal residence of another. Face coverings may be removed to participate in a religious ritual.

Guidance for Businesses

Certain businesses are required to have patrons and employees wear face coverings whether they are inside or outside when they are or may be within six (6) feet of another person, or unless an exception applies. Specific occupational settings, including health care settings, should continue to follow existing protocols and require surgical or procedure masks or N95 respirators, as indicated.

These businesses must follow the requirements for face coverings as described in Executive Order 147. These businesses, to the extent they are open are:

- Retail Businesses;
- Restaurants
- Personal Care, Grooming, and Tattoo Businesses;
- Child Care Facilities, Day Camps, and Overnight Camps;
- Gyms, Exercise Facilities, and Fitness Facilities,
- State Government Cabinet Agencies;
- Transportation;
- High-Density Occupational Settings Where Social Distancing is Difficult, including manufacturing settings, construction sites, and migrant farm or other farm settings;
- Meat or Poultry Processing Plants (new surgical mask requirement);
- Long Term Care Facilities (new surgical mask requirement);
- Other Health Care Settings (ongoing adherence to CDC guidance)

Exceptions. Face Coverings do not need to be worn by an individual, worker, customer, or patron in public places and business settings who:

- a. Has a medical or behavioral condition or disability and cannot wear a face covering (including, but not limited to, any person who has trouble breathing, or is unconscious or incapacitated, or is otherwise unable to put on or remove the face covering without assistance);

- b. Is under eleven (11) years of age (please see StrongSchoolNC Public Health Toolkit [school guidance](#) for requirement for requirements for K-12 school settings);
- c. Is actively eating or drinking;
- d. Is strenuously exercising or swimming;
- e. Is seeking to communicate with someone with hearing loss in a way that requires the mouth to be visible;
- f. Is giving a speech for a broadcast or to an audience;
- g. Is working at home or alone in a vehicle;
- h. Is temporarily removing his or her Face Covering to secure government or medical services or for identification purposes;
- i. Would be at risk from wearing a Face Covering at work, as determined by local, state, or federal regulators or workplace safety guidelines;
- j. Has found that his or her Face Covering is impeding visibility to operate equipment or a vehicle; or
- k. Is a child whose parent, guardian, or responsible person has been unable to place the Face Covering safely on the child's face.
- l. Children under two (2) years of age should not wear a face covering.

Frequently Asked Questions

What is a cloth face covering?

A cloth face covering is a material that covers the nose and mouth. It can be secured to the head with ties or straps or simply wrapped around the lower face. It can be made of a variety of materials, such as cotton, silk, or linen. A cloth face covering may be factory-made or sewn by hand or can be improvised from household items such as scarfs, T-shirts, sweatshirts, or towels. Ideally, a face covering has two (2) or more layers. These face coverings are not intended for use by healthcare providers in the care of patients. Surgical Masks, Procedure Masks, and N95 respirators are not recommended for general public use or use in community settings, as these should be reserved for specific high-risk occupational settings, healthcare providers and other medical first responders in a health care setting.

Are face shields allowed instead of cloth face coverings?

Yes, plastic face shields that wrap around the sides of the wearer's face and extend to below the chin are an allowed substitute for individuals that have difficulties wearing a cloth face covering.

When should I wear a cloth face covering?

You should wear face coverings when in public places, particularly when those locations are indoors or in other areas where physical distancing is not possible.

How should I wear a cloth face covering?

Be sure to place the face covering over your nose and your mouth and keep it in place at all times while you wear it. Be careful not to touch your eyes, nose, and mouth when removing or adjusting a face covering and wash hands immediately after removing or adjusting

How should I care for a cloth face covering?

Wash your cloth face covering frequently, ideally after each use, or at least daily. Have a bag or bin to keep cloth face coverings in until they can be laundered with detergent and hot water and dried on a

hot cycle. If you must re-wear your cloth face covering before washing, wash your hands immediately after putting it back on and avoid touching your face. Discard cloth face coverings that:

- No longer cover the nose and mouth
- Have stretched out or damaged ties or straps
- Cannot stay on the face
- Have holes or tears in the fabric

How well do cloth face coverings work to prevent spread of COVID-19?

Scientific evidence suggests that use of cloth face coverings by the public during a pandemic can help reduce disease transmission. Cloth face coverings can reduce the release of infectious particles into the air when someone speaks, coughs, or sneezes. Cloth face coverings are not a substitute for staying six (6) feet apart, washing hands, and staying home when ill.

Do I need to wear a face covering while exercising outdoors?

No. If you are able to safely maintain at least six (6) feet distance from others, you do not need to wear a face covering when exercising outdoors.

Should children wear cloth face coverings?

Cloth face coverings should NOT be put on babies and children under the age of 2 because of danger of suffocation. Children over the age of 2 should wear cloth face coverings if they can reliably wear, remove, and handle cloth face coverings throughout the day.

What if I am a person with hearing loss and am concerned about not being able to read lips?

Deaf and Hard of Hearing people often use lipreading to help understand what those around them are saying. When people are wearing cloth face coverings, other communication strategies are needed. Try finding a cloth face covering that has a clear plastic area that allows the lips to be visible, writing notes back and forth, writing on a white board to communicate, using a free speech to text app on mobile device, and gesturing – or if needed stepping several additional feet back from the person and removing face cloth face covering long enough to communicate.

What if I am a person with, or I support someone with a disability who cannot wear a face covering?

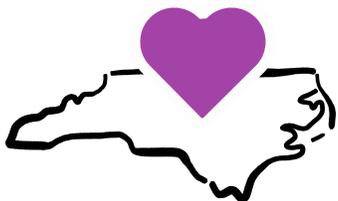
Some people may have trouble breathing or sensitivity to having something placed over their face. If you or someone you support is unable to wear a cloth face covering, be sure to take other steps to help avoid unnecessary exposure.

What if I am worried about being profiled or being subjected to bias if I wear a cloth face covering?

Some people may experience increased anxiety and fear of bias and being profiled wearing face coverings in public spaces – but wearing a cloth face covering protects your family, friends and neighbors. If you are the target of ethnic or racial intimidation as the result of adhering to the face covering provision or as a result of the pandemic, you are strongly encouraged to report the matter to law enforcement or other government entity. Everyone should be able to wear cloth face coverings without fear of profiling or bias, and any type of racial intimidation, profiling or bias for wearing a face covering should not be tolerated.

How does a retail or restaurant establishment comply with the requirement for customers to wear face coverings?

Executive Order 147 requires customers to wear face coverings inside retail and restaurant establishments. All retail and restaurant establishments must post signage (Option 1 ([English](#), [Spanish](#)) or Option 2 ([English](#), [Spanish](#))) at the entrance of the establishment stating that face coverings are required per Executive Order 147. A best practice would be to have an employee at the entrance to a business establishment to monitor both capacity restrictions and offer disposable face coverings to those without one, but this is not required to be in compliance. If the retail or restaurant establishment clearly posts the signage putting the customer on notice of the face covering requirement, it is deemed to be in compliance with the enforcement of face covering requirements contained in Executive Order 147. Any violation of this requirement may be reported to local authorities.



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