Central Sentinels - Pathfinder Club

Considerations for Pathfinder Clubs

CDC offers the following general considerations to help communities of faith discern how best to practice their beliefs while keeping their staff and congregations safe. Millions of Americans embrace worship as an essential part of life. For many faith traditions, gathering together for worship is at the heart of what it means to be a community of faith. But as Americans are now aware, gatherings present a risk for increasing spread of COVID-19 during this Public Health Emergency. CDC offers these suggestions for faith communities to consider and accept, reject, or modify, consistent with their own faith traditions, in the course of preparing to reconvene for in-person gatherings while still working to prevent the spread of COVID-19.

This guidance is not intended to infringe on rights protected by the First Amendment to the U.S. Constitution or any other federal law, including the Religious Freedom Restoration Act of 1993 (RFRA). The federal government may not prescribe standards for interactions of faith communities in houses of worship, and in accordance with the First Amendment, no faith community should be asked to adopt any mitigation strategies that are more stringent than the mitigation strategies asked of similarly situated entities or activities.

In addition, we note that while many types of gatherings are important for civic and economic well-being, religious worship has particularly profound significance to communities and individuals, including as a right protected by the First Amendment. State and local authorities are reminded to take this vital right into account when establishing their own re-opening plans.

Scaling Up Operations

- Establish and maintain communication with local and State authorities to determine current mitigation levels in your community.
- Provide protections for staff and congregants at <u>higher risk for severe</u> <u>illness</u> from COVID-19. Offer options for staff at <u>higher risk for severe</u>

- <u>illness</u> (including older adults and people of all ages with certain underlying medical conditions) that limit their exposure risk. Offer options for congregants at <u>higher risk of severe illness</u> that limit their exposure risk (e.g., remote participation in services).
- Consistent with applicable federal and State laws and regulations, put in place policies that protect the privacy and confidentiality of people at higher risk for severe illness regarding underlying medical conditions.
- Encourage any organizations that share or use the facilities to also follow these considerations as applicable.
- If your community provides social services in the facility as part of its mission, consult CDC's information for <u>schools</u> and <u>businesses and</u> <u>workplaces</u>, as relevant, for helpful information.

Promote healthy hygiene practices

- Encourage staff and congregants to maintain good hand hygiene, <u>washing</u> <u>hands</u> with soap and water for at least 20 seconds.
- Have adequate supplies to support healthy hygiene behaviors, including soap, hand sanitizer with at least 60 percent alcohol (for those who can safely use hand sanitizer), tissues, and no-touch trash cans.
- Encourage staff and congregants to cover coughs and sneezes with a tissue or use the inside of their elbow. Used tissues should be thrown in the trash and hands washed.
- Whenever soap and water are not readily available, hand sanitizer with at least 60% alcohol can be used.
- Consider posting signs on how to <u>stop the spreadpdf icon</u> of COVID-19 and how to <u>promote everyday protective measurespdf icon</u>, such as <u>washing hands</u>, covering coughs and sneezes, and <u>properly wearing a</u> <u>face coveringimage icon</u>.

Cloth face coverings

Encourage use of <u>cloth face coverings</u> among staff and congregants. Face coverings are most essential when <u>social distancing</u> is difficult. Note: <u>Cloth face coverings</u> should not be placed on children younger than 2 years old, anyone who has trouble breathing or is unconscious, and anyone who is incapacitated or otherwise unable to remove the cloth face covering

without assistance. <u>Cloth face coverings</u> are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms.

Intensify cleaning, disinfection, and ventilation

- <u>Clean and disinfect</u> frequently touched surfaces at least daily and shared objects in between uses.
- Develop a schedule of increased, routine cleaning and disinfection.
- Avoid use of items that are not easily cleaned, sanitized, or disinfected.
- Ensure <u>safe and correct application</u> of disinfectants and keep them away from children.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children or themselves from inhaling toxic fumes.
- Ensure that ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, etc. Do not open windows and doors if they pose a safety risk to children using the facility.
- If your faith community offers multiple services, consider scheduling services far enough apart to allow time for cleaning and disinfecting hightouch surfaces between services. <u>Take steps</u> to ensure that all water systems and features (for example, drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of <u>Legionnaires' disease</u> and other diseases associated with water.

Promote social distancing

- Take steps to limit the size of gatherings in accordance with the guidance and directives of state and local authorities and subject to the protections of the First Amendment and any other applicable federal law.
- Promote <u>social distancing</u> at services and other gatherings, ensuring that clergy, staff, choir, volunteers and attendees at the services follow social distancing, as circumstances and faith traditions allow, to lessen their risk.
- Consider holding services and gatherings in a large, well-ventilated area or outdoors, as circumstances and faith traditions allow.
- Consider appropriate mitigation measures, including taking steps to limit the size of gatherings maintaining <u>social distancing</u>, at other gatherings such as funerals, weddings, religious education classes, youth events,

- support groups and any other programming, where consistent with the faith tradition.
- Provide physical guides, such as tape on floors or walkways and signs on walls, to ensure that staff and children remain at least 6 feet apart in lines and at other times (e.g. guides for creating "one-way routes" in hallways).

Take steps to minimize community sharing of club materials and other items

- Consistent with the community's faith tradition, consider temporarily limiting the sharing of frequently touched objects, such as worship aids, prayer rugs, prayer books, hymnals, religious texts and other bulletins, books, or other items passed or shared among congregants, and encouraging congregants to bring their own such items, if possible, or photocopying or projecting prayers, songs, and texts using electronic means.
- Modify the methods used to receive financial contributions. Consider a stationary collection box, the main, or electronic methods of collection regular financial contributions instead of shared collection trays or baskets.
- Consider whether physical contact (e.g., shaking hands, hugging, or kissing) can be limited among members of the faith community.
- If food is offered at any event, consider pre-packaged options, and avoid buffet or family-style meals if possible.

Nursery/Childcare

- If a nursery or childcare will be provided during services and events, refer
 to CDC's information on <u>preventing the spread of COVID-19 in childcare</u>
 settings and adapt as needed for your setting.
- If holding summer day camps, refer to CDC's information on <u>youth and</u> <u>summer camps</u> and adapt as needed.

Staffing and Training

 Train all clergy and staff in the above safety actions. Consider conducting the training virtually, or, if in-person, ensure that <u>social distancing</u> is maintained.

Check for signs and symptoms

• Encourage staff or congregants who are sick or who have had close contact with a person with COVID-19 to stay home. Share CDC's criteria for staying home with staff and congregants so that they know how to care for themselves and others. Consider posting signs at entrances with this information.

Plan for when a staff member or congregant becomes sick

- Identify an area to separate anyone who exhibits <u>symptoms</u> of COVID-19 during hours of operation, and ensure that children are not left without adult supervision.
- Establish procedures for safely transporting anyone who becomes <u>sick</u> at the facility to their home or a healthcare facility.
- Notify local health officials if a person diagnosed with COVID-19 has been in the facility and communicate with staff and congregants about potential exposure while maintaining confidentiality as required by the <u>Americans</u> <u>with Disabilities Act (ADA)external icon</u> or other applicable laws and in accordance with religious practices.
- Advise those with <u>exposure</u> to a person diagnosed with COVID-19 to <u>stay</u> <u>home and self-monitor</u> for symptoms, and follow <u>CDC guidance</u> if symptoms develop.
- Close off areas used by the <u>sick</u> person and do not use the area until after cleaning and disinfection. Ensure <u>safe and correct application</u> of disinfectants and keep disinfectant products away from children.
- Advise staff and congregants with <u>symptoms</u> of COVID-19 or who have tested positive for COVID-19 not to return to the facility until they have met CDC's criteria to discontinue home isolation.

Maintain healthy operations

- Implement flexible sick leave and related flexible policies and practices for staff (e.g., allow work from home, if feasible), and provide requested reasonable accommodation absent undue hardship to individuals with disabilities under the <u>Americans with Disabilities Act (ADA)external icon</u> or other applicable laws and in accordance with religious practices.
- Monitor absenteeism and create a roster of trained back-up staff.

- Designate a staff person to be responsible for responding to COVID-19 concerns. Staff, clergy, volunteers, and congregants should know who this person is and how to contact them if they become sick or are around others diagnosed with COVID-19. This person should also be aware of state or local regulatory agency policies related to group gatherings.
- As volunteers often perform important duties (e.g., greeters, ushers, childcare), consider similar monitoring, planning, and training for them.
 Consider that volunteer and staffing may need to increase to implement cleaning and safety protocols and to accommodate additional services with reduced attendance.
- Communicate clearly with staff and congregants about actions being taken to protect their health.

Signs and Messages

- Post <u>signs</u> in highly visible locations (e.g., entrances, restrooms, gathering halls/community rooms/gyms) that <u>promote everyday protective</u>
 <u>measurespdf icon</u> and describe how to <u>stop the spreadpdf icon</u> of germs (such as by <u>properly washing hands</u> and <u>properly wearing a cloth face coveringimage icon</u>).
- Include messages (for example, <u>videos</u>) about behaviors that prevent the spread of COVID-19 when communicating with staff and congregants (such as in emails and on community websites and <u>social media accounts</u>).
- Find freely available CDC print and digital resources on CDC's <u>communications resources</u> main page.

Source:

https://www.cdc.gov/coronavirus/2019-ncov/community/faith-based.html

Procedures for Club/Camping Activities

As some communities in the United States begin to convene youth camps, CDC offers the following suggestions for ways in which camp administrators can help protect campers, staff, and communities, and prevent the spread of COVID-19. Camp administrators can determine, in collaboration with state and local health officials, whether and how to implement these considerations, making adjustments to meet the unique needs and circumstances of the local community. Implementation should be guided by what is feasible, practical, acceptable, and tailored to the needs of each community. These suggestions are meant to supplement—not replace—any state, local, territorial, or tribal health and safety laws, rules, and regulations with which camps must comply.

Guiding Principles to Keep in Mind

The more people a camper or staff member interacts with, and the longer that interaction, the higher the risk of COVID-19 spread. The risk of COVID-19 spread increases in youth camp settings as follows:

- Lowest Risk: Small groups of campers stay together all day, each day.
 Campers remain at least 6 feet apart and do not share objects. Outdoor activities are prioritized. All campers are from the local geographic area (e.g., city, town, county, community).
- **More Risk:** Campers mix between groups but remain at least 6 feet apart and do not share objects. Outdoor activities are prioritized. All campers are from the local geographic area (e.g., community, town, city, or county).
- **Even More Risk:** Campers mix between groups and do not remain spaced apart. All campers are from the local geographic area (e.g., community, town, city, or county).
- **Highest Risk:** Campers mix between groups and do not remain spaced apart. All campers are **not** from the local geographic area (e.g., community, town, city, or county).

COVID-19 is mostly spread by respiratory droplets released when people talk, cough, or sneeze. It is thought that the virus may spread to hands from a contaminated surface and then to the nose or mouth, causing infection.

Therefore, personal prevention practices (such as <a href="https://hand.com

Promoting Behaviors that Reduce Spread

Camp administrators may consider implementing several strategies to encourage behaviors that reduce the spread of COVID-19.

Staying Home when Appropriate

- Educate staff, campers, and their families about when they should <u>stay</u> <u>home</u> and when they can return to camp.
 - Actively encourage employees and campers who are sick or have recently had a <u>close contact</u> with a person with COVID-19 to stay home. Develop policies that encourage sick employees to stay at home without fear of reprisal, and ensure employees are aware of these policies.
 - <u>Employees and campers should stay home</u> if they have tested positive for or are showing COVID-19 <u>symptoms</u>.
 - Employees who have recently had a <u>close contact</u> with a person with COVID-19 should also <u>stay home and monitor their health</u>.
 - CDC's criteria can help inform when employees should return to work:
 - If they have been sick with COVID-19
 - If they have recently had a close contact with a person with COVID-19

Hand Hygiene and Respiratory Etiquette

- Teach and reinforce <u>handwashing</u> with soap and water for at least 20 seconds and increase monitoring to ensure adherence among campers and staff.
 - If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used (for staff and older children who can safely use hand sanitizer).

- Encourage staff and campers to cover coughs and sneezes with a tissue. Used tissues should be thrown in the trash and hands washed immediately with soap and water for at least 20 seconds.
 - If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used (for staff and older campers who can safely use hand sanitizer).

Cloth Face Coverings

- Teach and reinforce the use of <u>cloth face coverings</u>. Face coverings may be challenging for campers (especially younger campers) to wear in all-day settings such as camp. Face coverings should be worn by staff and campers (particularly older campers) as feasible, and are **most** essential in times when physical distancing is difficult. Information should be provided to staff and campers on <u>proper use</u>, removal, and washing of cloth face coverings.
 - Note: Cloth face coverings should **not** be placed on:
 - Babies or children younger than 2 years old
 - Anyone who has trouble breathing or is unconscious
 - Anyone who is incapacitated or otherwise unable to remove the cover without help

<u>Cloth face coverings</u> are meant to protect other people in case the wearer is unknowingly infected but does not have <u>symptoms</u>. Cloth face coverings are not surgical masks, respirators, or other medical personal protective equipment.

Adequate Supplies

 Support <u>healthy hygienepdf icon</u> by providing supplies including soap, hand sanitizer with at least 60 percent alcohol (for staff and older campers who can safely use hand sanitizer), paper towels, tissues, disinfectant wipes, cloth face coverings (as feasible), and no-touch/foot pedal trash cans.

Signs and Messages

 Post <u>signs</u> in highly visible locations (e.g., camp entrances, dining areas, restrooms) that <u>promote everyday protective measurespdf</u> <u>icon</u> and describe how to <u>stop the spreadpdf icon</u> of germs such as by <u>properly washing hands</u> and <u>properly wearing a cloth face</u> <u>coveringimage icon</u>.

- Broadcast regular <u>announcements</u> on reducing the spread of COVID-19 on PA system
- Include messages (for example, <u>videos</u>) about behaviors that prevent spread of COVID-19 when communicating with staff and families (such as on camp websites, in emails, and through camp <u>social media</u> <u>accounts</u>).
- Find free CDC print and digital resources on <u>CDC's communications</u> resources main page

Source:

https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/summer-camps.html