

WASHINGTON TOWNSHIP RECREATION DEPARTMENT
COVID-19 Operational Plan for 2022

This plan addresses operations of a youth summer camp operated on municipal property, sports activities (such as sports organizations utilizing Township fields and recreation sports camps), recreation programs in general and senior programs. Requirements and procedures in this plan may be modified based upon changes to state standards and CDC guidance.

Youth Day Camp:

The Township contracts with one operator (MVCA) biennially for use of Rock Spring Park for a day camp each summer. The MVCA will inform the Township if it intends to operate the camp this summer after reviewing the standards issued by the NJDOH. Should the MVCA decide to operate the camp this year, compliance with the Executive Order and the COVID-19 Child Care and Youth Summer Camp Standards are required.

The standards are attached and are also available at:

https://www.nj.gov/health/ceohs/documents/phss/Youth_Day_Camps_Standards_COVID-19.pdf

The operators must provide a COVID-19 Youth Camp Operations Plan to the NJDOH 24 to 48 hours prior to start of camp.

The Health Department has forwarded the COVID-19 Child Care and Youth Summer Camp Standards to the other entities which operate Child Care and Youth Summer Camps within the municipality.

Sports Groups Utilizing Township Fields: Sports activities are also organized by various sports groups which utilize municipal fields for practice and games.

The New Jersey Department of Health issued updated Guidance on Sports Activities on September 20, 2021, which is attached and also available at:

https://nj.gov/health/cd/documents/topics/NCOV/COVID_GuidanceForSportsActivities.pdf

A program preparation plan is required before practice can be permitted and must be submitted to the Township with field usage applications.

Recreation Programs: The Township contracts with several operators to provide daytime summer programs for periods of time typically ranging from days to weeks. These programs are offered in subject areas such as science and for different sports.

Sports program operators must comply with the Guidance on Sports Activities and submit a Program Preparation Plan to the Township Recreation Department for review by the Department of Health 2 weeks prior to the start of activities.

In addition to the NJDOH Guidance for Sports Activities, camps that fall under the medium and/or high risk category, generally those with games and/or physical contact, must comply with COVID-19 Child Care and Youth Summer Camp Standards, in addition to Standards for Sports Activities, and submit a COVID-19 Youth Camp Operations Plan to the NJDOH 24 to 48 hours prior to start of activities. High risk sports programs also require a youth camp license from NJDOH.

Operators of camps that focus on sports skills and drills with no physical contact will be required to submit a plan demonstrating that activities can be done individually, do not involve person-to-person contact and do not routinely entail individuals interacting within six feet of one another. The plan shall be reviewed for compliance by the Township Health Department before registration can commence.

Camps and Sports Activities in General: The NJDOH Guidance on Sports Activities states, "Playing sports has a range of physical, emotional, and interpersonal benefits. Due to increased exhalation that occurs during physical activity, however, some sports can put players, coaches, trainers, and others at increased risk for getting and spreading COVID-19. Close contact sports and indoor sports are particularly risky." To ensure awareness of these hazards, an acknowledgment waiver has been prepared by the Township Attorney's office for participants in the youth day camp, recreation sports programs and in sports groups that utilize Township fields.

Operators of camps, programs and/or sports groups shall provide program preparation plans to the Township, which after approval shall be posted on the recreation section of the Township website (www.wtmorris.org), and make approved plans available to their participants.

This COVID-19 Operational Plan for 2022 shall be provided to operators and made available on the Township website.



New Jersey COVID-19 Youth Summer Camp Standards

New Jersey youth summer camps are permitted to open for campers beginning on July 6, 2020, pursuant to Executive Order 149. The opening of youth camps will provide New Jersey families who are in need of childcare services with a viable option in addition to traditional childcare centers. “Youth summer camps” are defined in the Order to include youth day camps required to be licensed pursuant to N.J.S.A. 26:12-1 et seq., facilities operating programs as described in N.J.S.A. 30:5B-3(b)(4), and other entities that provide daily multi-hour programming for youths, without regard to whether the program is subject to the certification requirements pursuant to N.J.S.A. 26:12-1 et seq., including youth programs operated by municipal agencies. Residential and overnight camps are not permitted to operate pursuant to the Order.

As required by Executive Order 149, the Department of Health has developed these guidelines to govern the operations of youth summer camps. These guidelines set forth protocols governing all aspects of camp operations and describe the steps each camp should take to lower the risk of COVID-19 exposure and spread. Please note that given the dynamic nature of this pandemic, this guidance may be modified as the situation evolves and new data becomes available.

The Centers for Disease Control and Prevention (CDC) has issued guidance, “[Considerations for Youth and Summer Camps](#),” and an easy to follow [decision tool](#) delineating factors youth camp operators should assess in determining whether to open and guidelines for operating camps safely during the COVID-19 pandemic. The Department of Health recommends that each youth summer camp facility review the CDC guidance materials to assist with making decisions prior to opening.

COVID-19 Youth Camps Standards

Inspection and Enforcement for Youth Day Camps that are required to be licensed pursuant to N.J.S.A. 26:12-1 et seq.

- Where required by statute, youth day camps, including municipally-operated programs, complete Youth Camp Certificate application form
- Follow important dates (application submitted by June 15, 2020, if you wish to open on July 6, 2020, and attestation form at least 24 hours prior to opening)
- Preoperational inspection from the Local Health Authority (LHA)
- Operational inspection from the Department and/or LHA

Pursuant to Executive Order No. 149, youth day camps are also required to develop policies and procedures that follow the standards outlined set forth below.



Implementation for All Youth Summer Camp Providers

All youth summer camps and youth summer programming operators must develop and implement a COVID Operational Plan that meets the requirements of Executive Order 149 (see appendix), as well as all applicable guidance contained herein. Such Plan should include written policies and procedures for each of the topics listed below. In addition to any requirements outlined in statute and regulation, all summer youth camps are required to submit an attestation form to the Department of Health.

<https://www.nj.gov/health/ceohs/sanitation-safety/youthcamps.shtml>

I. Staff and Camper Training

Camps should conduct staff training online, when possible, at the season orientation meeting and should update staff on the basic principles of emergency first aid, blood borne pathogens, infection control, hand washing practices, personal protective equipment (PPE) and COVID-19 signs and symptoms. For youth day camps that are subject to N.J.S.A. 26:12-1 et seq, preseason orientation meeting shall meet the requirements of N.J.A.C. 8:25-3.2(d). Details can be found at

<https://www.nj.gov/health/ceohs/sanitation-safety/youthcamps.shtml>.

Additionally:

1. The health director must have knowledge of COVID-19 symptoms and current guidance documents from the New Jersey Department of Health Communicable Disease Service found at <https://www.nj.gov/health/cd/>
2. Policy regarding personal protective equipment (PPE) use and training
3. Instruct campers on safe practices while attending camp
4. Access these training resources:
 - a. [Infection Prevention Audit Tool](#)
 - b. [Contact Tracing Awareness Training](#)
 - c. [Infection Control Resources Document](#)

Staff should also be trained in all of the protocols outlined below.

II. Screening and Admittance

Persons that have a fever of 100.4° or above or other signs of COVID-19 illness should not be admitted to the camp. Facilities should encourage parents and staff to be on the alert for signs of illness in their children and to keep them home when they are sick. In order to effectuate this policy, camps should institute the following protocols:

- A. At designated entry points, campers and staff must be screened for fever or signs of COVID-19 illness prior being permitted to enter the facility or participate in camp programming.

Symptoms related to COVID-19 include:

- 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

Daily health surveillance screening for campers/staff must be conducted and results documented when signs and symptoms of illness are observed.

Isolate and remove any campers or staff if symptoms are related to COVID-19. Follow current Communicable Disease Service guidance for illness reporting <https://www.nj.gov/health/cd/>

III. Face masks, Infection Control and Social distancing strategies

A. Face coverings and gloves

Staff and campers shall, at minimum, wear cloth face coverings when social distancing of 6 feet between individuals and/or assigned groups cannot be maintained, except where doing so would inhibit that individual's health. Additionally, staff and campers are encouraged to wear cloth face coverings unless (1) doing so would inhibit the individual's health, (2) the individual is in extreme heat outdoors, or (3) the individual is in the water.

Cloth face coverings should NOT be put on children under age two because of the danger of suffocation.

Staff should perform proper hand washing and use gloves. Staff should wear gloves when handling or serving food to campers.

Camps must supply their staff with such cloth face coverings and gloves.

B. Infection Control Strategies

All youth camp programs shall implement the following prevention and mitigation strategies to slow and limit COVID-19 exposure and spread:

1. Consider staggering drop off and pick up times to avoid large groups from congregating in one location.
2. Communicate and educate staff, parents, and campers in COVID-19 safety measures including:
 - Staying home when ill
 - Proper hand hygiene and respiratory etiquette
 - Wearing face coverings
 - Avoiding touching your face as much as possible
 - Reporting illnesses and symptoms to the camp Health Director or other healthcare personnel at the camp immediately
3. Face coverings are encouraged to be worn by campers and are most essential in times when physical distancing is difficult to maintain. It is understood that face



coverings may be challenging to campers (especially younger campers) to wear in all-day settings such as camp.

4. Handwash and hand sanitizers stations should be provided in numerous areas around the camp, and hand sanitizer should be provided to staff.
5. Implement enhanced cleaning and disinfection procedures using EPA approved disinfectants and following [CDC guidance](#).
6. Discourage sharing of items that are difficult to clean, sanitize, or disinfect.
7. Institute infection control procedures for areas around the camp, including entrances, dining areas, restrooms, and other areas prone to congregation
8. Limit any non-essential visitors, volunteers, and activities involving external groups or organizations as much as possible. Limit any nonessential visitors, volunteers, and activities involving external groups or organizations as much as possible – especially with individuals not from the local geographic area (e.g., community, town, city, or county).
 - a. Visitors shall be required to wear cloth face coverings while visiting the youth camp unless doing so would inhibit the individual’s health. If a visitor refuses to wear a cloth face covering for non-medical reasons and if such covering cannot be provided to the individual by the business at the point of entry, the youth camp must decline to allow them to enter.
 - b. Avoid group events, gatherings, or meetings where social distancing of at least 6 feet between people cannot be maintained. Limit group size to the extent possible.
 - c. Avoid activities and events such as field trips and special performances.

If the camp becomes aware that an individual tests positive for COVID-19, the camp should immediately notify [the Department of Health-Youth Camp Project](#), local health officials, staff and families of a confirmed case while maintaining confidentiality. Camp administrators should implement a policy to prepare for when someone tests positive for COVID-19 that include, at minimum:

1. Written protocols detailing the camps COVID related response for symptomatic staff and campers including:
 - a. Establishment of an isolation space
 - b. Adequate amount of personal protective equipment (PPE) available, accessible, and provided for use
 - c. Methods to assist in contact tracing including records of groups/cohorts, assigned staff and daily attendance
 - d. Surveillance
 - e. Immediate notification to the Department of Health-[Youth Camp Project](#) and the Local Health Department (LHD) of those who test positive
2. Written protocols to address a positive case
 - a. Readmittance policies follow [CDS guidance](#), found at https://www.nj.gov/health/cd/documents/topics/NCOV/COVID-QuickRef_Discont_Isolation_and_TBP.pdf and



<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html>

- b. When an individual tests positive for COVID-19, the camp should immediately notify local health officials, along with the Youth Camp Safety project and can return when they clear isolation.
3. Actions to take in response to individuals exhibiting signs and symptoms of COVID-19 (e.g. fever, cough, shortness of breath) while on-site
 - a. Immediately separate the ill person from the well people until the ill person can leave the camp. The caregiver attending the ill camper and the camper should wear a face covering; try to maintain social distancing within the care area.
 - b. Staff members should be sent home and advised to follow, [What to Do if You Are Sick](#)
 - c. Follow additional [Guidance for Camps](#) issued by the DOH's Communicable Disease Service (CDS) and the CDC
4. Actions to take in response to notification that a staff or camper has tested positive for COVID-19
 - a. The camp health director shall contact their [LHD](#), State Health Department, Youth Camp Safety Project, for guidance.

Local health officials in consultation with CDS recommendations, will provide direction if a camp closure is warranted, following the identification of positive case(s) at the youth camp. The duration may be dependent on staffing levels, outbreak levels in the community and the number of close contacts the camper had. Staff and children are discouraged from attending another facility if the camp is closed.

- b. Staff should help camp administration in identifying close contacts of positive COVID-19 cases. This should be done in conjunction with the LHD
- c. Close off areas used by a sick person and do not use these areas until after cleaning and disinfecting them (for outdoor areas, this includes surfaces or shared objects in the area, if applicable).
- d. To reduce the risk of exposure, wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible. Ensure safe and correct use and storage of cleaning and disinfection products, including storing them securely away from children.
5. Actions to take on returning a staff or camper after COVID-19 Diagnosis or Exposure
 - a. Close contacts and/or sick staff members or campers should not return to camp until they have met CDC's criteria to discontinue home isolation.

IV. Protocols for Facility and Buildings Management

- A. Ventilation:** Camps must ensure that their indoor facilities have adequate ventilation, including operational heating, ventilation and air conditioning ("HVAC") systems where appropriate.
 - i. Recirculated air must have a fresh air component
 - ii. Open windows if A/C is not provided



- iii. Filter(s) for A/C units must be maintained and changed according to manufacturer recommendations

B. If multiple entities operate programs out of a shared facility, those entities must coordinate to arrange staggering of activities to minimize intermingling between groups of campers

- i. Install physical barriers where necessary
- ii. Signs delineating 6 feet for social distancing, frequent handwashing etc.

C. Policy and procedures for cleaning and disinfection:

- i. Close shared spaces such as dining halls, if possible; otherwise stagger use and [clean and disinfect](#) between use
- ii. Routine daily cleaning or as much as possible of common surfaces such as playgrounds with shared playground equipment (staggered use) and rooms (ex: countertops, restrooms, etc.)
- iii. Cleaning of shared objects
- iv. Plans to ensure that an adequate supply of cleaning supplies is maintained
- v. Procedure for deep cleaning that follow [CDC guidelines](#) for reopening a camp closed due to the identification of positive case(s) as recommended by CDS

D. Post signage

- i. Pictures to show [social distancing](#), [handwashing](#), [face coverings](#), and [other prevention methods](#) are recommended

- E. When campers need to be evacuated, social distancing should be maintained as much as possible.

V. Attendance

The attestation form will require camps to designate the camp setting as either an “indoor”, “outdoor” or mixed facilities camp to address limitations imposed by Executive Orders. The CDC guidance recommends restrictions on mixing of groups within the camp setting to reduce potential transmission and facilitate a simplified method of contact tracing. In line with these recommendations, camps are required to predetermine operations as either primarily indoor or outdoor camp, which require different protocols.

A. Indoor and outdoor requirements

1. Ensure, to the maximum extent possible, that groups include the same group of children each day and that the same staff remain with the same group of children each day. Ideally, try to keep groupings developed on the first day intact throughout the duration of the camp session or season whichever is longer.

- i. Restrict mixing between groups. Camp operators should minimize camper movement between groups.
- ii. Groups shall stay together and if interactions with other groups occur, social distancing must be maintained between groups.



- iii. Staff and campers must social distance and wear face covering especially when social distancing cannot be maintained

B. Indoor camp requirements

- i. Staff to camper ratios 1 adult:1 counselor:10 campers (ages 5-17)
 - 1. Do not to allow intermingling between groups. Designated groups of campers must remain unchanged day to day and not be allowed to intermingle between assigned groups.
 - 2. Indoor designated camps should not allow intermixing of groups while children are outside.
 - 3. Follow [DCF guidance](#) for childcare centers licensed as both a youth camp and childcare center where appropriate and are not contrary to the Youth Camp Safety Standards.
 - 4. Staff ratios for campers under five years of age must be maintained according to the New Jersey Youth Camp Safety Standards
 - a. Campers with ages from 2.5 through 4 must be supervised by one counselor for every 7 children.

C. Outdoor camp requirements

- i. Staff to camper ratios 1 adult:1 counselor:20 campers (ages 5-17)
- ii. Outside canopy/tenting/cover accessibility required
- iii. Summer camps need to ensure that precautions are taken in consideration of inclement weather and emergencies:
 - 1. Outdoor designated camps that elect to occasionally move indoors due to inclement weather or similar event, as opposed to cancelling session, should ensure proper indoor space to contain campers while following social distancing protocols.
 - 2. Groups of campers should remain unchanged day to day and not allowed to intermingle between assigned groups.
 - 3. Staff ratios for campers under five years of age must be maintained according to the New Jersey Youth Camp Safety Standards
 - a. Campers with ages from 2.5 through 4 must be supervised by one adult and one counselor for every 14 children.

Restrict attendance to states that have opened youth camps.

VI. Protocols for Transportation Services

- A. During bussing/transportation to and from camp, encourage social distancing by maximizing space between riders and maintaining space between the driver and the passengers
 - i. A staff person should accompany the driver on all transportation routes to ensure safety and social distancing
- B. Face covering must be worn by all staff onboard buses
- C. Face coverings are encouraged to be worn by campers as feasible and required in times when social distancing is difficult to maintain. It is understood that use of face coverings may be challenging for younger campers.
- D. Open windows, except during inclement weather, to encourage ventilation
- E. Vehicles must be cleaned and disinfected between each use



VII. Documented policy and procedure for food service

A. Social distancing

Camps should avoid communal dining where possible and consider serving meals in separate rooms if possible. If feasible, have campers bring their own meals. Camps must make appropriate accommodations for food storage. Additionally, mealtimes should be staggered to ensure separation of groups and avoid congregation.

B. Hygiene and sanitation

1. Clean and sanitize surfaces between each meal service, pursuant to the protocols outlined [here](#)
2. No self-service or buffet style dining
3. Encourage proper hand washing before and after meals
4. Use disposable food service items (utensils, dishes). If disposable items are not feasible or desirable, ensure that all non-disposable food service items are handled with gloves and washed with dish soap and hot water or in a dishwasher.

VIII. Activities

A. Documented policy and procedure which outlines permitted and prohibited activities

- i. Prohibit any off-site activities and field trips
- ii. Stagger outside play events for individual camp and coordinate outside play between camps sharing the same building (Ex: school site location)
- iii. Prohibition on contact sports or inter-group competitions.
- iv. Playing competition matches/games where players from separate camps/regions/locations gather to compete is prohibited.
- v. Sporting activities must be conducted in an outdoor setting.
- vi. "Skills and drills" activities that do not involve contact and can be social distanced are not prohibited.
 1. Focus on team skills and drills
 2. Focus on individual skill building
 3. Limit the time players spend in proximity to each other
 4. Increase breaks and hydration activities
 5. Follow CDS guidance regarding pool operations
- vii. Educate campers and staff on sports etiquette regarding social distancing and hygiene (i.e., no spitting, high-fives, handshakes, etc.)
- viii. Avoid use of items that are not easily cleaned, sanitized, or disinfected (i.e., soft or plush toys)
- ix. Clean, disinfect and air-dry equipment after use



- x. Recommend face coverings for appropriately aged campers during activity, if appropriate and not in extreme hot weather

IX. Questions or Concerns

- A. Questions or concerns on the content, interpretation or application of this guidance can be directed to the Department of Health – Youth Camp Safety Project at 609-913-5115 or email at youthcamps@doh.nj.gov

School districts that are operating “youth summer camps” as defined in Executive Order No. 149 should continue to follow the relevant rules, regulations, and guidelines of any athletic conference of which they are a member, e.g. the NJSIAA. In addition, youth day camps that are otherwise subject to the requirements of N.J.S.A. 26:12-1 et seq. must submit an application and receive a Certificate of approval from the Department.



Appendix

Minimum Elements of the COVID-19 Summer Camp Plan

- The CDC decision-making guidance chart attached to your plan for summer camp 2020 youth camp season.
- Ensure the health director is appropriately credentialed, is always on-site, and has knowledge and training in infection control (noted above) and COVID-19 Sign and symptoms
- Ensure that youth camp is also licensed by DCF as a childcare center if you have campers under 2 and half years old.
- Ensure that your camp does not offer residential and/or overnight services
- Designation as an indoor or outdoor camp or both
- Ensure that your camp does not operate until after July 6
- For those camps that are required to seek certification prior to operation, apply to the youth camp project at least 2 weeks prior to start of camp activities
- Ensure that the camp has no off-site activities
- Ensure that camps prohibit contact sports
- Ensure that staff and campers are educated on social distancing, hygiene (hand washing, cough etiquette), proper use of face coverings and staying home when sick
- Adequate postings of signage encouraging hand hygiene, social distancing and COVID-19 prevention materials?
- Drop off and pick up procedures
- Temperature screening and health surveillance activities at entry for staff and campers
 - a. Exclude symptomatic staff/campers from site (provide isolation area for staff/campers who are already on-site that are exhibiting signs and symptoms)
- Groups of campers (maximum of 10 indoors and 20 outdoors)
- Ensures food service avoids communal dining and stagger mealtimes
- Sick staff/camper policies
- Routine cleaning and disinfection frequencies (deep cleaning prior to opening and after periods of closure due to positive cases)
- Emergency evacuation procedures
- Where transportation services are provided, ensure appropriate sanitation and social distancing procedures



References

Centers for Disease Control and Prevention (CDC). *Considerations for Youth and Summer Camps*. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/summer-camps.html> (accessed May 21, 2020)

Centers for Disease Control and Prevention (CDC). *CDC Activities and Initiatives Supporting the COVID-19 Response and the President's Plan for Opening America Up Again: Appendix F INTERIM GUIDANCE FOR SCHOOLS AND DAY CAMPS* <https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf> (accessed May 19, 2020)

Centers for Disease Control and Prevention (CDC). *Considerations for Youth Sports*. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/youth-sports.html> (accessed May 24, 2020)

Centers for Disease Control and Prevention (CDC). *Youth Programs and Camps Decision Tool Public Health Considerations for Reopening Youth Programs and Camps During the COVID-19 Pandemic*. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/youth-programs-decision-tool.html> (accessed May 19, 2020)

Centers for Disease Control and Prevention (CDC). *Water and COVID-19 FAQs: Information about Drinking Water, Treated Recreational Water, and Wastewater*. <https://www.cdc.gov/coronavirus/2019-ncov/php/water.html> (accessed May 9, 2020)

Environmental Health & Engineering Inc. (2020, May 18). *Field Guide for Camps on Implementation of CDC Guidance: Prepared for American Camp Assoc. and YMCA of the USA*. (Retrieved from: <https://www.acacamps.org/resource-library/coronavirus/camp-business/camp-operations-guide-summer-2020>)

New Jersey Department of Children and Families. (2020, March, 25). *Guidance for New Jersey Child Care Facilities*. https://www.nj.gov/dcf/news/DCF-Health-Safety-Standards_for_Child-Care-Centers.3-25-20.pdf (accessed May 26, 2020)

New Jersey Department of Children and Families. *Guidance for New Jersey Child Care Facilities*. (May 29, 2020)

<https://www.nj.gov/dcf/news/Final.CC.Health.and.Safety.Standards.pdf>

Return to work and isolation criteria

https://www.nj.gov/health/cd/documents/topics/NCOV/COVID-QuickRef_Discont_Isolation_and_TBP.pdf

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>

Email the Youth Camp project with any questions at youthcamps@doh.nj.gov



Guidance for Sports Activities

May 28, 2021

Summary

This “Guidance for Sports Activities” published by the New Jersey Department of Health (NJDOH) is intended to guide organizations that oversee sports activities as they resume operations to ensure the health and safety of staff, participants, and their families. The Guidance address skill-building drills and team-based practices as described in the [Centers for Disease Control and Prevention \(CDC\) Guidance on Youth Sports](#).

This guidance document does not apply to professional or collegiate sports activities or US national team activities.

High school sporting activities under the jurisdiction of the New Jersey Interscholastic Athletic Association (NJSIAA) must abide by NJSIAA protocols, which shall consider NJDOH guidance. Club, recreation, and travel teams must follow NJDOH guidance to ensure the safety of athletes and others involved in the sport.

The public health data on which this document is based can and do change frequently. Organizers should check back frequently for updates. NJDOH also encourages organizers to keep informed of guidance from the CDC, which may change regularly.

Note that this document does not apply to sports-related activities during school hours, such as physical fitness classes, which continue to be guided by Executive Order No. 175 and related guidance materials from the Departments of Education and Health. This document, including the revised policy on masking, does apply to extracurricular sports activities, even where they are performed on school property.

Youth and Adult Sports Interstate Restrictions

All interstate outdoor games and tournaments for youth sports, up to and including high school, are permitted as of March 19, 2021, and indoor interstate youth competitions are permitted as of May 19, 2021. Interstate youth sports competition includes any sports game, scrimmage, tournament, or similar competition that is conducted outdoors with opposing teams or individuals from different states competing against each other and which would require an opposing team or individual to travel from a state outside of New Jersey.

Indoor competitions are subject to the gatherings limit for non-professional, non-collegiate sports activities, as most recently laid out in Executive Order No. 239. Effective June 4, 2021, these events will not be subject to any numerical limit in indoor settings. Social distancing is encouraged for all athletes (when not actively participating in activity), coaches, referees, trainers, and spectators, in both indoor and outdoor settings, regardless of vaccination status. Individuals are not required to wear masks at indoor or outdoor events, unless the operator imposes its own requirements. Unvaccinated individuals are encouraged to wear masks.

While New Jersey’s Travel Advisory is no longer in effect, individuals are encouraged to review CDC guidance regarding travel before participating in interstate activities, available here: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html>.



Sports program operators must abide by the following risk assessment chart:

<u>Risk Level</u>	<u>Examples</u>	<u>Permissible Activities</u>	<u>Prohibited Activities</u>
High risk - Sports that involve close, sustained contact between participants	Rugby, boxing, judo, karate, taekwondo, wrestling, pair figure skating, football, group dance, group cheer.	All activities are permitted	None
Medium Risk - Sports that involve some close, sustained contact, but with protective equipment in place between participants OR intermittent close contact OR group sports OR sports that use equipment that cannot be cleaned between participants.	Lacrosse, hockey, multi-person rowing, multi-person kayaking, multi-person canoeing, water polo, swimming relays, fencing, cycling in a group, running in a close group, group sailing, volleyball, soccer, basketball, baseball/softball, short track.	All activities are permitted	None
Low Risk - Sports that can be done individually, do not involve person-to-person contact and do not routinely entail individuals interacting within six feet of one another	Archery, shooting/clay target, individual running events, individual cycling events, individual swimming, individual rowing, individual diving, equestrian jumping or dressage, golf, individual sailing, weightlifting, skiing, snowboarding, tennis, individual dance, pole vault, high jump, long jump, marathon, triathlon, cross country, track and field, disc golf, badminton.	All activities are permitted	None



Guidance for Operations

Outdoor and Indoor Sports and Athletic Facilities Organizations, businesses, schools, and government entities that operate outdoor and indoor sports facilities, such as athletic fields, courts and other playing surfaces, pools, and sailing and boating facilities that are permitted to reopen their premises and facilities to adult sports and supervised youth sport leagues, summer sports camps, and other athletic activities should follow the safety measures outlined below. As a reminder, municipalities retain the discretion to open or close municipal fields or facilities.

1. Preparing a Sports Program for Practices

- a. Each sports program should create a plan (“program preparation plan”) to ensure the following:
 - i. Identify adult staff members or volunteers to help remind coaches, players and staff of social distancing. Use of signs, tapes or physical barriers can be used to assist with guiding social distancing requirements.
 - ii. Within the program, consider creating consistent groups of the same staff, volunteers, and athletes, and avoid mixing between groups.
 - iii. Individuals shall remain 6 feet apart from one another whenever possible. This applies to athletes, coaching staff, and referees, as well as parents/guardians and other spectators to the extent they are permitted.
 - iv. Unvaccinated individuals are strongly encouraged to wear face masks, subject to the conditions outlined above, particularly where social distancing cannot be maintained. Face masks should **not** be worn when engaged in activities that may cause the cloth face covering to become wet, like when swimming, or when doing so may endanger the individual’s health. When face masks are not worn, efforts should be made to maintain at least 6 feet from others.
 - v. Create staggered schedules to limit contact between groups and/or players.
 - vi. Limit the use of carpools or van pools. When riding in an automobile to a sports event, encourage players to ride to the sports event with persons living in their same household.
 - vii. All staff should be educated on COVID-19 health and safety protocols prior to the resumption of athletic activities, including:
 1. Revised practice rules and regulations in place during COVID-19;
 2. The importance of staying home when experiencing symptoms of COVID-19 or residing with someone experiencing symptoms of COVID-19;
 3. Social distancing and facecoverings;
 4. Proper hand hygiene;
 5. How to address a situation in which an athlete presents with symptoms of COVID-19; and



6. How do address situations in which social distancing or other necessary requirements are challenged by athletes or parents/guardians/visitors.
- viii. Educate athletes and coaching staff about when they should stay home and when they can return to activity.
 1. Actively encourage sick staff, families, and players 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.
 2. [Individuals, including coaches, players, and families, should stay home](#) if they have tested positive for or are showing COVID-19 [symptoms](#).
 3. Individuals, including coaches, players, and families, who have recently had a [close contact](#) with a person with COVID-19 should also [stay home and monitor their health](#).
 4. Immediately separate coaches, staff, officials, and athletes with COVID- 19 symptoms at any sports activity. Individuals who have had close contact with a person who has symptoms should be separated and sent home as well, and follow [CDC guidance for community-related exposure](#).
 5. Establish procedures for safely transporting anyone who is sick to their home or to a healthcare facility.
 - ix. All athletes, coaches, and staff should bring their own water and drinks to practice activities. Team water coolers for sharing through disposable cups and other types of shared water sources should not be permitted
 - x. Encourage athletes to use their own equipment to the extent possible.
 - xi. Discourage sharing of equipment as much as possible. If equipment is shared, coaching staff should be aware of the sanitation procedures for team equipment (balls, bats, etc.) and sufficient disinfecting wipes or similar products should be made available. Consult CDC guidance for cleaning and disinfection.
 - xii. Locker rooms are permitted to open.
 1. Only individually partitioned showers or communal showers with installed barriers/partitions (at least 6 feet apart) are permitted.
 2. Close or mark lockers to enforce 6 feet social distancing. Ensure signage is in place to reminding athletes to maintain proper physical distancing of 6 feet in locker room.
- b. Communicate applicable details of the plan to parents/guardians and/or participants before commencing practices.
 - c. Organizers should further consult and implement, as appropriate, recommendations listed in the CDC guidance regarding assessing risk, promoting healthy behaviors, and maintaining a healthy environment during youth sports.



2. Preparing an Indoor or Outdoor Facility for Sports Practices

- a. Each facility that will be used for practices should:
 - i. Post signage in highly visible locations with reminders regarding social distancing protocols, face covering requirements, and good hygiene practices (e.g., hand hygiene, covering coughs);
 - ii. Reduce crowding around entrances, exits, and other high-traffic areas of the facility;
 - iii. Ensure routine and frequent cleaning and disinfecting, particularly of high-touch surfaces in accordance with CDC recommendations;
 - iv. Limit occupancy in restrooms that remain open to avoid overcrowding, maintain social distancing through signage and, where practicable, utilize attendants to monitor capacity; and
 - v. Have hand sanitizer, disinfecting wipes, soap and water, or other sanitizing materials readily available at entrances, exits, benches, dugouts, and any other area prone to gathering or high traffic.
 - vi. On any given field or space, provide for sufficient space between designated groups to prevent interaction.
- b. Indoor facilities should ensure appropriate indoor air/ventilation by:
 - i. Keeping doors and windows open where possible and utilize fans to improve ventilation.
 - ii. Inspect and evaluate the heating, ventilation and conditioning (HVAC) unit to ensure that the system is operating within its design specifications and according to existing building code standards.
 - iii. Conducting routine maintenance as recommended by the manufacturer or HVAC professional.
 - iv. Within the design specification of the HVAC unit:
 - 1. Increasing the volume of outdoor air to the maximum capacity while the gym is occupied.
 - 2. Reducing the volume of recirculated air being returned to the indoor spaces
 - 3. Increasing the volume of air being delivered to the indoor spaces to the maximum capacity
 - 4. Selecting maximum filtration levels for the HVAC unit.
 - 5. Ensuring that the HVAC unit runs continuously while the facility is occupied.
 - 6. Ensuring that the HVAC unit runs for at least two hours before and two hours after the facility is occupied.
 - 7. Considering installing portable air cleaners equipped with a high efficiency particulate air (HEPA) filter to increase the amount of clean air within the facility.
 - 8. Reviewing and following the latest CDC guidance for ventilation requirements.



3. Conducting Sports Practices

- a. All athletes, coaches, staff and others participating in practices and competitions should be screened, via temperature check and/or health questionnaire¹, at the beginning of each session. Players, coaches, staff, and volunteers showing symptoms of COVID-19 should not be permitted to participate. If any individual develops symptoms of COVID-19 during the activity, they should promptly inform organizers, be removed from the activity and instructed to return home.
- b. Coaches, staff, visitors and athletes will be required to abide by the gatherings/limitations as set forth in Executive Orders and/or Administrative Orders in effect at the time of competition.
- c. Encourage practice activities that do not involve sustained person-to-person contact between athletes and/or coaching staff and limit such activities in indoor settings. For example, focus on individual skill-building activities.
- d. Adhere to precautions outlined in the program preparation plan.
- e. Ensure that athletes and coaches adhere to social distancing while not actively involved in practice activities (on the bench, in the dugout, etc.). Consider assigning coaching staff to monitor sideline social distancing.
- f. If any equipment is provided by the operator, operators should minimize equipment sharing and clean and disinfect shared equipment at the end of a practice session using a product from the list of disinfectants meeting EPA criteria for use against the novel coronavirus. Do not permit athletes to share food, beverages, water bottles, towels, pinnies, gloves, helmets or any other equipment or materials that is involved in direct bodily contact.
- g. Consider dividing larger teams into smaller groups and staggering practices at different times or across different days.
- h. Unvaccinated individuals are strongly encouraged to wear masks, particularly where social distancing cannot be maintained.
- i. Where they are permitted, operators are encouraged to mark off spectator/chaperone viewing sites to allow for social distancing. Visitors showing symptoms of COVID-19 should not be permitted to attend.
- j. Restrict spitting, handshakes, high-fives, team huddles, and any other close-contacting activities.

¹ Examples of appropriate screening documents can be accessed at <https://www.cdc.gov/screening/paper-version.pdf> (CDC screener), or https://www.njsiaa.org/sites/default/files/documents/2020-10/covid-19-screening-questions_0.pdf (NJSIAA screener).



4. Preparing for games and tournaments

Competitions, tournaments, invitationals, and other activities or events that involve interaction between athletes from the same team or between teams, while permitted, carry [significant risks](#) that operators, towns, coaches, parents and others should carefully consider before proceeding. If participating in or organizing a competition, tournament, or invitational:

- a. Follow protocols listed above under “conducting sports practices.”
- b. Coaches, staff, visitors and athletes will be required to comply with the gathering limitations, as set forth in Executive Directives and Administrative Orders, in effect at the time of competition.
- c. Concession stands should meet the requirements for indoor and outdoor dining outlined in the applicable Executive Orders and Executive Directives.
- d. Consider social distancing requirements when scheduling contests and events. Social distancing will need to be maintained on buses/vans. Thus, multiple buses/vans and/or individual parent/guardian transportation will likely be required. Games should be scheduled at intervals that allow for proper sanitation of facilities and equipment following each game.

Additional notes:

- **Contract Tracing/Public Health Investigation:** Operators, coaches, participants, and others engaging in sports activities **must** cooperate with local health departments (LHDs) on contact tracing. Contact tracing is the process used to identify those who have come into contact with people who have tested positive for many contagious diseases, including COVID-19. It is a long-standing practice and is an integral function of LHDs. Given that club sports teams and recreational sports teams are comprised of students enrolled in local school districts, it will be necessary for both club/recreational youth sports staff and school district staff, including but not limited to administrators, school nurses, school safety specialists, counselors, and any other staff deemed appropriate by the school district, to collaborate with and assist LHDs with contact tracing in the event of illness of a player, coach, referee, athletic trainer, and/or anyone else involved with a sports team/group. Additionally, all school districts and club/recreational youth sports staff should collaborate with LHDs to develop contact tracing policies and procedures, as well as identify the best methods to educate the broader school and youth sports community on the importance of the public health investigation and contact tracing.
- **Behavior of the athletes off the field.** Athletes who do not consistently adhere to social distancing (staying at least 6 feet apart), mask wearing, handwashing, and other prevention behaviors pose more risk to the team than those who consistently practiced these safety measures. Operators and coaches should encourage all participants to abide by applicable infection control protocols outside of the sports activity.
- **Testing of participants.** Testing is recommended if an athlete, coach, or other team member is sick, was exposed to a person who has COVID-19 or had “close contact” with an individual. Any further testing recommendations are dependent on the re-evaluation of the state’s testing priorities.



New Jersey 2021 COVID-19 Youth Summer Camp Standards Guidelines

Rev. 6-9-2021

New Jersey youth day and resident summer camps are permitted to open, pursuant to Executive Order No. 237. The Youth Camp Safety Standards and COVID-19 Standards were not designed to support year-round (Ex: learning centers) accommodation for students/children displaced due to hybrid school models implemented by the New Jersey Department of Education (DOE). During this period, youth camps are only allowed to operate during out-of-school vacations and holidays (e.g., summer break, spring break, etc.) where the activity includes at least one high risk activity as defined in N.J.A.C. 8:25-1.4.

At this time, all owners/operators of youth camp programs should stay up to date with any changes to state and federal requirements related to summer day camp entities and incorporate those changes into their operations. This guidance is not intended to replace any existing applicable local, state, and federal laws, regulations, and standards, and is designed to supplement the youth camp program.

The multilayered use of nonpharmaceutical interventions (NPI) such as face masks, cohorting, social distancing of 6 feet, hand hygiene and cleaning and disinfecting has shown to be successful when mitigating the transmission of SARS-CoV-2 within the youth camp setting. The Department of Health has developed these guidelines to govern the operations of youth summer camps, as required by Executive Order No. 237.

If eligible, staff, volunteers, campers, and family members are strongly encouraged to get fully vaccinated for COVID-19 at least two weeks prior to traveling to camp. Per updated guidance from the Centers for Disease Control and Prevention (CDC), camps should encourage all unvaccinated staff and campers to engage in a 2-week prearrival quarantine. Camp staff and campers who are not fully vaccinated are encouraged to get tested with a viral test 3–5 days after traveling home from camp AND stay home and self-quarantine for 7 days after their return home.

General requirements for youth summer camps

1. "Youth summer camps" are defined in the Order to include youth camps required to be licensed pursuant to N.J.S.A. 26:12-1 et seq., facilities operating programs as described in N.J.S.A. 30:5B-3(b)(4), and other entities that provide daily multi-hour programming for youths, without regard to whether the program is subject to the certification requirements pursuant to N.J.S.A. 26:12-1 et seq., including youth programs operated by municipal agencies.
2. Youth camps that are subject to the requirements of N.J.S.A. 26:12-1 et seq., must complete a Youth Camp Certificate application form.



3. Youth camps do not include child care services designed to accommodate children displaced due to a school district virtual learning curriculum.
4. Licensed youth camps must meet the definition and offer at least one high risk activity, accommodate 5 or more children under 18 years of age, operate 3 hours or more over the course of 2 or more days within the same week.
5. Municipal public camps meeting the above definition of youth camps must comply with EO No. 237 and this guidance. The application fee for municipal camps will be waived with the following requirements: A request to waive the application fee must be submitted on the municipality's letterhead and a Youth Camp Certification application form must be completed.
 - a. Municipal public camps meeting the definition of youth camps under Executive Order No. 237 are not subject to the provisions of N.J.S.A 26:12-1 et seq., and the regulations promulgated at N.J.A.C 8:25, however, it is strongly recommended that the regulations are followed.
6. Youth camps, as defined in Executive Order No. 237, must develop and implement a COVID-19 Operational Plan that, at minimum, includes written policies and procedures addressing the following areas:
 - a. Training
 - i. Youth camp operator must access and review the CDC's [Youth Camp Programs and Camps Readiness and Planning Tool](#)
 - ii. Camps must conduct staff training and update staff on the basic principles of emergency first aid, infection control, hand washing practices, personal protective equipment (PPE) and COVID-19 signs and symptoms.
 - iii. The health director must (1) be designated as the camp's COVID-19 point of contact, (2) be knowledgeable about COVID-19 signs and symptoms, and (3) be familiar with the following training resources:
 1. Training resources:
 - a. New Jersey Department of Health Communicable Disease Service (CDS) [COVID-19 Youth Camp Guidance](#)
 - b. [Contact Tracing Awareness Training](#)
 - c. [Infection Control Resources Document](#)
 - d. Centers for Disease Control(CDC) [Suggestions for Youth and Summer Camps](#)
 2. Monitor the [COVID-19 Activity Report](#) at least weekly
 - iv. Camps must document in writing how age-appropriate instruction is provided to campers and their families on safe practices while attending camp, including face coverings, hand hygiene and staying home when ill.



b. Promote Healthy Hygiene Practices

- i. Teach and reinforce among all campers and staff the importance of washing hands and covering one's mouth and nose when coughing or sneezing.
- ii. Teach and reinforce use of face coverings among all staff. Staff should be reminded not to touch the face covering and to wash their hands frequently.
- iii. Staff and campers should be educated on proper use, removal, and disposal of face coverings.
- iv. Have adequate supplies to support healthy hygiene behaviors, including soap, hand sanitizer with at least 60 percent alcohol (for staff and older campers who can safely use hand sanitizer), tissues, and no-touch trashcans.
- v. Post signs on how to stop the spread of COVID-19, properly wash hands, promote everyday protective measures, and properly wear a face covering.
- vi. Provide educational materials in advance to families for sharing with campers prior to camp and reinforce awareness at staff and camper orientation and periodically thereafter for all throughout the camp experience.
- vii. Encourage, promote and prioritize outdoor activities.

c. Screening and Admittance

- i. Educate staff, campers and their families about when they should [stay home](#) and when they can return to camp.
- ii. Create a communication system for staff and camper families for self-reporting of symptoms and notification of exposures and closures. In the resident camp setting, a communication system for camper self-reporting of symptoms and notification of exposures and closures should be implemented. Camps should provide clear and accessible directions to their camp community for reporting symptoms and reasons for absences.
- iii. Require staff and campers who are sick or have recently had a close contact with a person with COVID-19 to stay home.
- iv. Develop a policy for safe and respectful daily screening of staff/camper/visitor. The CDC has issued guidance on the activity available [here](#). Such screenings should be conducted in accordance with any applicable privacy laws or regulations. Confidentiality must be maintained.
 1. Parents/caregivers are strongly encouraged to monitor their children for signs of illness every day, as they are the "front line" for assessing illness in their children.
 2. Have a plan to screen students if not screened by parents prior to arrival.



3. At resident camps, staff assigned for the oversight of a camper under care are encouraged to monitor children for signs of illness everyday, as they are the “front line” for assessing illness in the child.
- v. Monitor staff absenteeism and consider maintaining a roster of trained back-up staff.

d. Face Coverings and Social Distancing

i. Staff Masking:

1. In indoor settings, unvaccinated staff must wear face masks at all times except when not practicable, such as when eating or drinking, sleeping, or swimming.
2. Outdoors, unvaccinated staff are strongly encouraged to wear a mask in crowded outdoor settings or during activities that involve sustained close contact with other people who are not fully vaccinated.
3. Vaccinated staff need not mask in indoor or outdoor settings.
4. Camps must supply their staff with face coverings.

ii. Camper masking: It is understood that face coverings may be challenging for campers, particularly younger campers, in an all-day setting.

1. In outdoor settings campers are not required to mask, regardless of their vaccination status, but should still remain within their cohorts. Unvaccinated campers are encouraged to wear a mask in crowded outdoor settings or during activities that involve sustained close contact with other people who are not fully vaccinated.
2. Indoors, unvaccinated campers are encouraged to wear face coverings at all times, but particularly when physical distancing is difficult, unless (1) doing so is impracticable, such as when a camper is eating or drinking or (2) while the individual is in the water.
3. Vaccinated campers need not mask in indoor or outdoor settings.
4. Face masks should not be put on any child under the age of two.
5. Camps must supply campers with face masks.

e. Infection Control and Monitoring

i. Youth camp programs shall implement the following prevention and mitigation strategies to slow and limit COVID-19 exposure and spread:

1. Document vaccination status for fully vaccinated staff and campers.
2. Stagger arrival and drop-off times or locations by cohort (group) and limit contact between cohorts as much as possible.
3. Communicate and educate staff, parents, and campers in COVID-19 safety measures including:
 - a. Staying home when ill;



- b. Proper hand hygiene and respiratory etiquette;
 - c. Wearing, removing and discarding face coverings;
 - d. Reporting illnesses and symptoms to the camp Health Director or other healthcare personnel at the camp immediately.
 4. Handwash and/or hand sanitizers stations shall be provided in numerous areas around the camp.
 5. Document [cleaning and disinfection](#) procedures and frequencies for frequently touched surfaces, and high traffic areas such as restrooms, dining areas, and indoor areas prone to congregation using EPA approved disinfectants.
 6. Discourage sharing of items, especially those that are difficult to clean or disinfect. If items are shared, limit use of supplies and equipment by one group of campers at a time and clean and disinfect between use.
 7. Consider limiting non-essential visitors, volunteers, and activities involving external groups or organizations as much as possible.
 - a. Visitors are required to wear face coverings unless medically contraindicated. If a visitor refuses to wear a cloth face covering for non-medical reasons and if such covering cannot be provided to the individual by the business at the point of entry, the youth camp must decline entry.
 - b. Avoid large group events, gatherings, or meetings where social distancing of at least 6 ft. between assigned groups and/or individuals from other groups cannot be maintained.
- f. Plan for When a Staff, Camper or Visitor Becomes Sick

Camp administrators must implement a policy in the event someone tests positive with COVID-19 or gets sick while on site with COVID-19 symptoms. The camp's COVID-19 response policy must include, at a minimum, the following procedures:

 1. The camp must immediately separate the impacted staff or camper(s) from the other staff and campers.
 2. If the camp becomes aware of an individual who has tested positive for COVID-19, the camp must **immediately** notify the local health authority where the camp is located. While maintaining confidentiality, the camp must also immediately notify all staff and families of campers that a confirmed case has been identified at the camp.



- a. Notification to the [NJDOH-Youth Camp Safety Project](#) is required within 24 hours at youthcamps@doh.nj.gov.
 3. The camp must establish a COVID-19 isolation area.
 4. Document procedures detailing the safe transportation of implicated staff/camper.
 5. Document procedures for contact tracing, which include maintaining records of groups/cohorts, assigned staff and daily attendance logs.
 - a. Camp administration should assist the local health department with identifying close contacts of positive COVID-19 cases.
 6. Document policies that detail camper/staff readmittance which follow NJCDS [COVID-19 Youth Camp Guidance](#)
 7. Document policies and procedures for closure due to outbreak as determined by the LHD.
 - a. Local health officials, in consultation with CDS epidemiologists, will provide direction to the camp if a closure is warranted.
 - i. The duration of a temporary closure may be dependent on several factors which will be communicated by the local health official.
 - ii. Notification of a recommended closure to the [NJDOH-Youth Camp Safety Project](#) is required within 24 hours at youthcamps@doh.nj.gov.
 - b. Staff/campers are discouraged from attending another facility if the camp is closed due to an outbreak.
 - c. Close off areas used by a sick person and do not use these areas until after cleaning and disinfecting them (for outdoor areas, this includes surfaces or shared objects in the area, if applicable). Follow CDS guidance on [reopening after a closure](#).
- g. Day and Overnight Camp Operations where Everyone is Fully Vaccinated
- i. Camp activities may resume at full capacity (subject to the restrictions in N.J.A.C. 8:25 where the regulation is otherwise applicable to their operations) when everyone (staff/campers) having contact with campers attending the camp is fully vaccinated. “Full capacity” means activities are no longer required to implement COVID-19 mitigation strategies regarding masking, social distancing, and cohorting. The camp operator should document the COVID-19 Operational Plan as detailed herein that establishes a plan for responding in the event of a concern regarding COVID-19. Camp



Operators may indicate 'n/a' for sections where the rules outlined do not apply to the camp community.

ii. Vaccination status documentation must be maintained by the camp.

h. Intensify Cleaning, Disinfection, Facilities and Ventilation

i. Outdoor camp activities are strongly encouraged.

1. Canopy/tenting/cover accessibility is required for camps that maintain a primarily outdoor camp environment.
2. Camps must have procedures in place in the event of inclement weather. Outdoor camps may move their activities indoors, as opposed to cancelling session, but should ensure properly ventilated indoor space to allow for social distancing unless the camp meets the requirements of Section G above for fully vaccinated camp operations.

ii. Refer to the [CDC cleaning guidance](#) for general information.

iii. Clean and disinfect frequently touched surfaces within the camp and on buses at least daily (e.g., playground equipment, door handles, railings) and shared objects between uses (e.g., toys, games, art supplies).

1. Document the frequency of cleaning and disinfecting of bathrooms.

iv. Create processes for bathroom use that encourage 6 ft. of social distancing while also protecting camper safety.

v. Ventilation

1. Inspect and evaluate the heating, ventilation and air conditioning (HVAC) unit to ensure that the system is operating within its design specifications and according to existing building code standards.
2. Conduct routine maintenance as recommended by the manufacturer or HVAC professional within the design specifications of the HVAC unit.
3. Set HVAC systems to bring in as much outdoor air as the system will safely allow. Reduce or eliminate HVAC air recirculation, when practical and with expert HVAC consultation.
4. Make sure the ventilation systems are serviced. If the camp does not own the building where the camp is operated, it should contact the owner and discuss and document any actions taken over the pandemic to ensure indoor air quality.
5. Run the HVAC unit for at least two hours before and two hours after the facility is occupied.
6. Filter(s) for A/C units must be maintained and changed according to manufacturer recommendations.



7. The camp should open windows if air conditioning (A/C) is not provided.
 8. Consider installing portable air cleaners equipped with a high efficiency particulate air (HEPA) filter to increase the amount of clean air within the facility.
 9. Consider using carbon dioxide devices as a means of monitoring CO2 levels and ventilation/air flow within a room/space.
- vi. Take steps to ensure that all water systems and features (e.g., drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other water-borne diseases.
- vii. Shared Buildings
1. If multiple entities/camps operate programs using a shared facility (Ex: school building), those entities must arrange to stagger their activities in order to minimize intermingling among groups of campers.
- i. Attendance and Cohorting (Groupings)
- i. Restrict mixing between groups.
 1. Ensure, to the maximum extent possible, that groups include the same children and staff each day. Camp operators should minimize unvaccinated staff/camper movement between groups.
 2. If mixing of unvaccinated staff/campers cannot be avoided, masking of all floating unvaccinated staff and campers should be implemented.
 - ii. Camper: Staff Cohorts
 1. Staff to camper ratios of 1 adult:1 counselor: 20 campers (ages 5-17 yrs.).
 - a. Groupings/cohorts that are comprised whereby at least ½ of all group/cohort participants are vaccinated the group may increase the count of participants by an additional 1:10 ratio.
 2. Staff to camper ratios of 1 adult: 1 counselor: 14 campers (ages 2.5 through 4 yrs.)
 3. Municipal public camps are required to abide by the maximum camper number per cohort stated above at ii.1 and 2. Though they are strongly encouraged to maintain the staff to camper ratios stated above, they are not required to do so where they are not otherwise subject to the N.J.S.A. 26:12-1 et seq.
 - iii. Social distancing of 6 ft. should be maintained between groups.



j. Transportation Services

- i. During bussing/transportation, social distancing must be maintained by maximizing space between riders and maintaining space between the driver and the passengers.
 1. Consider seating campers who are part of a cohort or family members together to maximize limited space.
- ii. When feasible, a staff person should accompany the driver on all transportation routes to ensure safety and social distancing.
- iii. Face coverings must be worn by all onboard transport vehicles except for those with medical necessities which prohibit the use and children 2 and under.
- iv. Open windows, if safe to do so and except during inclement weather, to encourage air flow.
- v. Vehicles must be cleaned and disinfected between uses and the activity documented.
- vi. Masking may be required on public transportation per CDC directive.

k. Food Service

- i. Camps should stagger mealtimes and ensure cohorts remain intact.
 1. If feasible, have campers bring their own meals.
 2. Camps must make appropriate accommodations for food storage.
 3. Consider serving meals in separate rooms if possible and avoid congregation.
 4. Consider serving meals in outdoor environments.
- ii. Clean and sanitize surfaces between each meal service.
- iii. Eliminate self-service food such as buffets and salad bars. Self-service food is permitted where all food is packaged (e.g. is in individual wrapping or plastic containers). Facilities may operate buffet stations if food is kept behind plexiglass or a similar barrier and an attendant serves the campers and staff. Limit self-service drink stations to those that can be routinely and effectively cleaned and disinfected.
- iv. Encourage proper hand washing before and after meals.
- v. Use disposable food service items wherever feasible.
 1. If disposable items are not feasible, ensure that all non-disposable food service items are properly cleaned and sanitized.

l. Sports and Recreational Activities

- i. Where possible, strongly encourage activities that have the potential to produce respiratory droplets including singing, chanting, shouting, or playing



an instrument be performed outside. If conducted indoors, unvaccinated campers and staff are strongly encouraged to wear masks and physically distance, unless not practicable (i.e. when an individual is playing an instrument that requires use of their mouth), during these activities.

- ii. All indoor sports and recreational activities shall be conducted in accordance with the [Organized Sports Guidance](#) .
- iii. Camps should increase breaks and encourage hydration of masked staff/campers throughout the day.
- iv. All swimming activities which include unvaccinated staff and campers should ensure cohorts are maintained and face covering as outlined in the Section D above apply.
- v. Sprinkler and spray park play areas which do not use recirculated water are approved for use and are not regulated via the [N.J.A.C. 8:26 Public Recreational Bathing](#) rule
 1. Ensure social distancing procedures are in place for unmasked water play participants.
- vi. Educate campers and staff on sports etiquette regarding social distancing and hygiene (e.g., no spitting, handshakes, etc.).
- vii. Clean and disinfect shared equipment between use. Avoid use of items that are not easily cleaned or disinfected.
- viii. Stagger outside play and events for individual camps (campers?) and coordinate outside play between camps sharing the same building.
- ix. Off-site activities and field trips are discouraged, but not prohibited.
 1. When participating in off-site activities and field trips, proper mask use is required consistent with Section D above, unless:
 - a. impractical for an individual to wear a face mask, such as when the individual is eating, drinking or swimming, or
 - b. when not around the general public (Ex. Hiking in wooded area away from the public).
 2. Offsite activities should minimize prolonged contact with others outside the camp.
 3. Consider day trips with small groups to nearby recreational areas where interaction with the external community may be limited.
 4. Day/resident camps who elect to participate in field trips and off-site activities must keep in mind that venue capacities remain impacted by Executive Orders limiting their on-site capacity and gatherings limits.

m. Additional Requirements for Resident and Sleepaway Camp Activities

- i. [COVID-19 Testing](#)



1. Fully vaccinated campers and staff are not required to participate in routine testing for COVID-19. Vaccination status documentation must be maintained by the camp.
 2. Before arrival: All unvaccinated/partially vaccinated staff/campers will be required to have a documented negative test within 72 hours of arriving on-site.
 - a. Camps must have a procedure for documenting any exceptions.
 - b. Proof of clinical illness and recovery in the past 90 days will serve as acceptable documentation in lieu of before arrival testing.
 3. After arrival: Unvaccinated/partially vaccinated staff/campers will be required to receive a documented test within 3-6 days of arrival at any youth camp.
 - a. Where the length of stay at camp is three days or less, this test is not required.
 4. Resident camps must document policies and procedures for testing.
 5. Lab analyzed tests whereby results are reported in congruence with New Jersey Communicable Disease Service guidelines are required
- ii. Camp operators should strongly encourage their eligible camp staff and campers to get vaccinated.
 - iii. Camp operators should, prior to the arrival of staff and campers at the facility, communicate to staff, campers and parents the continued accessibility of free COVID-19 testing in areas across the country.
 - iv. Operators should strongly encourage unvaccinated staff/campers to quarantine prior to arrival at camp.
 - v. Camps should document policies and procedures that minimize the risk of transmission for staff concerning their permissible off-duty activities. The rules should detail expectations, training, testing, quarantine and isolation policies and procedures.
 1. At minimum, screen staff upon return
 2. Consider retesting staff upon return to the camp.
 - vi. Long-term camps lasting more than 14 days who have implemented a bubble environment whereby all staff and campers remain on-site at all times, and routine on-site testing, quarantine and monitoring is conducted to establish “stable cohorts”, may help facilitate safer larger group activities after the 15th day.



- vii. For all resident camps, health directors and other on-site health personnel must identify an isolation room or area to separate anyone who exhibits COVID-19 like [symptoms](#). Also, see Section F above.
- viii. Resident camps must document policies and procedures for the isolation and quarantine of impacted staff/campers. Also, see Section F above.
 - 1. These policies and procedures must be provided to staff and to parents and guardians of all campers prior to attending camp.
 - 2. Parents/guardians may choose to allow campers to stay at the camp or to take their child home. Parents/guardians who choose to pick up a sick child should be provided with educational material regarding isolation, quarantine and the [care of someone sick with COVID-19](#).
- ix. Bunking/ Sleeping
 - 1. Try to align mats or beds so that campers and staff sleep head-to-toe and at least 6 ft. apart.
 - 2. Ensure adequate ventilation within sleeping quarters.
 - a. Consider portable air filters in the sleeping quarters.
 - b. When possible, promote cross ventilation by opening two or more windows.
 - c. Consider the use of child-safe fans to increase the effectiveness of open windows. Safely secure fans in a window to blow potentially contaminated air out and pull new air in through other open windows and doors.
 - d. Set HVAC systems to bring in as much outdoor air as the system will safely allow. Reduce or eliminate HVAC air recirculation, when practical and with expert HVAC consultation.
- x. Campers, as part of defined cohort based on sleeping arrangements, are not required to mask while in their assigned sleeping quarters and among bunkmates/cohort.
 - 1. Campers must mask when 6 ft. distancing is not feasible or cannot be maintained when in the presence of those outside of their bunk/cohort.
- xi. Document the frequency of [cleaning and disinfecting](#) of bathrooms (e.g., in the morning and evening, after times of heavy use) and use [EPA-registered disinfectants](#)
 - 1. Encourage staff and campers to avoid placing toothbrushes or toiletries directly on counter surfaces.
- xii. Staff and campers with symptoms of COVID-19 at resident camps should immediately be separated from other campers and staff and follow [CDS Youth Camp Guidance](#). Individuals who are sick should be cared for in



accordance with [CDC Guidance for caring for oneself and others who are sick](#).

1. Staff/campers with symptoms are encouraged, but not required, to stay at the camp.
- xiii. Staff and campers who have had close contact with a person who has symptoms should be separated, monitored and follow [CDS Youth Camp Guidance](#). If symptoms develop, individuals who are sick should be cared for following [CDC guidance for caring for yourself or others who are sick](#).
1. Staff/campers with symptoms are encouraged, but not required, to stay at camp.
- xiv. If a person becomes sick and needs to be transported, camps must establish procedures for safely transporting him or her. If circumstances require medical transport of someone displaying symptoms of COVID-19, the camp should advise the dispatcher or receiving health care facility that the person may have COVID-19.
- n. High Risk and Special Needs Populations
- i. Parents of campers are encouraged to work with their primary care provider and the camp director to determine if camp is a reasonably safe option for them.
 - ii. Camps should consider adjusting cohort ratios as necessary to promote child safety and to ensure that social distancing can be maintained.
 - iii. For children who rely on lip reading, people in close contact can use face coverings with transparent windows. Face shields alone are not a substitute for a face covering.

7. Violations and Enforcement

- a. Compliance with the conditions set forth in this Executive Directive shall be investigated and enforced by the Department of Health.
- b. A youth camp's noncompliance with the conditions set forth in this Executive Directive that is reasonably believed to endanger public health will be subject to a closure order by the Department of Health.



Public Health Recommendations for Youth Sports

September 20, 2021

Overview

Playing sports has a range of physical, emotional, and interpersonal benefits. Due to increased exhalation that occurs during physical activity, however, some sports can put players, coaches, trainers, and others at increased risk for getting and spreading COVID-19. Close contact sports and indoor sports are particularly risky. Sports activities often require people to be together for extended periods of time while participating in games or practices, socializing before and after games, and when traveling to and from events. Several outbreaks of COVID-19 associated with youth sports were reported in 2020-2021. This document provides public health recommendations for minimizing COVID-19 transmission in youth sports settings.

Sports activities conducted during school hours and/or in the indoor premises of school premises, including those conducted as part of physical education classes, must continue to follow the masking requirements outlined in Executive Order No. 251. Those requirements are not impacted by these recommendations. Additionally, schools should continue to follow guidance in [The Road Forward: Health and Safety Guidance for the 2021-2022 School Year](#) for instructional activities, including physical education classes. Additional guidance is available in the [NJDOH Public Health Recommendations for Local Health Departments and K-12 Schools](#).

Prevention Plan

Youth sports organizers/coaches should create an updated written plan that outlines the COVID-19 prevention steps, policies, and procedures that will be followed. Organizers/coaches should educate all staff, athletes, and parents on the plan. Plans should, at minimum, address the following: protocols for when a player/coach/other team member presents with symptoms of COVID-19, protocols for when prevention measures are challenged by players or parents/guardians/visitors, quarantine periods, and coordination with public health authorities on investigation and contact tracing. Youth sports organizers may want to post signage with COVID-19 recommendations at sporting events as a reminder for athletes, staff, and parents.

COVID-19 Prevention Measures

Vaccination

COVID-19 vaccines are safe and highly effective at preventing COVID-19 illness, including severe complications and hospitalization. They are one of the most important tools to ending the COVID-19 pandemic and are free for persons who live, work, or study in New Jersey. Being fully vaccinated¹ provides the highest level of protection against the virus that causes COVID-19 and can minimize disruptions in the sports season resulting from illness and quarantine.

Youth sports organizers should be aware of staff and athlete's vaccination status to assist public health authorities with contact tracing and to minimize unnecessary exclusions if someone on the team tests positive for COVID-19. If all athletes and staff are not fully vaccinated, layering additional preventive measures, such as masking and physical distancing, is even more important to protect those who are not fully vaccinated.

Physical Distancing

Youth sports organizers/coaches should encourage physical distancing of players when not actively engaged in practices and games, particularly when individuals are in an indoor setting where not everyone is fully vaccinated. When possible, cohort coaches, players, volunteers and others to avoid mixing between groups and consider staggering practice schedules to limit contact between players and/or groups. Consider physical distancing around entrances, exits, and other high-traffic areas and limiting shared carpools or van pools for unvaccinated athletes. Coaches should encourage unvaccinated individuals to continue to maintain physical distance (and mask) before and after practices/games as well.

Masking

Wearing masks is an important prevention strategy to help slow the spread of COVID-19 and is particularly important when not everyone is fully vaccinated, when indoors, and when physical distancing cannot be maintained.

¹ People are considered fully vaccinated 2 weeks after their second dose in a 2-dose series, such as the Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine, such as Johnson & Johnson's Janssen vaccine

Unvaccinated Individuals

- Indoors: Unvaccinated individuals are recommended to wear a mask in indoor settings when not actively engaged in a practice or game. This includes sitting on the bench, standing on the sideline/in a huddle, gathering/setting up sporting equipment, or spectating.
- Outdoors: Masks are generally not necessary but are encouraged when there is high level of [COVID-19 transmission](#) and when close contact with other unvaccinated individuals cannot be avoided.

Fully Vaccinated Individuals

- Indoors: It is recommended that fully vaccinated individuals wear a mask in public indoor settings in areas of high [COVID-19 transmission](#) or where there is increased risk. This includes crowded settings, close contact with others who may not be vaccinated or whose vaccine status is unknown, and if the individual or household member is immunocompromised or at increased risk for severe disease.
- Outdoors: Masking is not generally recommended for fully vaccinated individuals. Fully vaccinated people might choose to wear a mask in crowded outdoor settings if they or someone in their household is immunocompromised, at increased risk of severe disease, or not fully vaccinated.

Symptom screening

Athletes, coaches, staff, and others should be encouraged to stay home if ill with COVID-19 symptoms (or if they are unvaccinated and live with someone who has COVID-19). Screening for fever and symptoms via temperature check and/or questionnaire should be done at the beginning of each session. Anyone with a fever or any symptoms of COVID-19 should not participate in activities and should separate from others and either go home or seek medical care if needed. If any individual develops symptoms of COVID-19 during an activity, they should promptly inform organizers and must leave the facility/field. A plan for safely transporting ill persons home or for medical care should be in place. Common [symptoms of COVID-19](#) include fever, cough, and tiredness. Other symptoms include loss of taste or smell, aches and pains, headache, sore throat, nasal congestion, red eyes, nausea, vomiting, or diarrhea.

Contact tracing

Coaches should know how to contact their [local health department](#) to notify them of persons who test positive and to assist with identifying others who may have been exposed to the ill team member. A team representative should be designated who will be responsible for contacting and coordinating with the local health departments should a COVID-19-positive individual be identified or in the event contact tracing is needed. This representative should be prepared to share the team roster containing contact information of parents/guardians to aid in public health investigation.

Hand Hygiene/Personal Hygiene

Youth sport organizers/coaches should encourage regular handwashing (soap and water or hand sanitizer with at least 60% alcohol), upon arrival and departure from the sports event, at minimum. Restrict spitting, handshakes, high-fives, team huddles, and other close-contact activities. Advise athletes to bring their own water and drinks and limit the use of team water coolers.

Cleaning and Disinfection

Encourage players to use their own equipment to the extent possible. Sanitize shared/team equipment (balls, bats, etc.) and ensure sufficient disinfecting wipes or similar products are available. Ensure routine and frequent cleaning and disinfecting with an [EPA-registered disinfectant](#), particularly of high-touch surfaces in accordance with CDC recommendations.

Indoor Air Flow

Youth sports organizers should work with facility management staff to keep doors and windows open where possible and utilize fans to improve ventilation. Facility managers should refer to [NJDOH guidance on improving ventilation and indoor air quality](#).

Testing & Exclusion

Testing is an important tool to identify persons with COVID-19, even if they have no symptoms, which can prevent further transmission and outbreaks. Where feasible, prevention plans should include options for testing². Persons who test positive for COVID-19 should not participate in youth sports activities until they meet the criteria for discontinuing isolation or quarantine.

Persons who are ill: Anyone experiencing fever or other symptoms of COVID-19 should be tested for COVID-19 and be referred to medical care if needed. Persons who test positive (or who don't get tested) should not return to sports until at least 10 days have passed since symptom onset and at least 24 hours have passed since resolution of fever without the use of fever-reducing medications and other symptoms have improved.

Persons who had close contact with someone who has COVID-19: Persons who had close contact (within 6 feet for >15 minutes in a 24-hour period) should be tested for COVID-19.

- Unvaccinated individuals should be tested as soon as possible and if negative, again 5-7 days after the last exposure. When [COVID-19 activity](#) is "High," persons who test negative (or if they weren't tested) should stay home and quarantine for 14 days. If COVID-19 activity is not "High," they should quarantine for 10 days if they aren't tested or 7 days if they test negative between 5-7 days after exposure³. If they test positive for COVID-19, they should follow timeframes for "persons who are ill."
- Fully vaccinated individuals should be tested 3-5 days after exposure, but as long as they remain asymptomatic, can continue participation in youth sports.

Routine screening testing: Consider regular screening testing for unvaccinated team members where feasible to identify unknown cases so that measures can be taken to prevent further transmission. Fully vaccinated individuals don't need to participate in routine screening programs. Refer to [NJDOH Recommendations for Screening Testing in Schools](#) for additional information and screening testing strategies. Youth sports organizers should consult with their local health department if developing a screening testing program. If screening testing is implemented, all test results must be reported to public health authorities and the confidentiality of testing results must be ensured. When developing a screening testing program, the [COVID-19 activity](#) level and the risk level of the sporting activity should be considered.

² Persons who recently recovered from COVID-19 (in the past 3 months) aren't recommended to be re-tested because they may continue to test positive but no longer be contagious.

³ Refer to [NJDOH Minimum Quarantine Timeframes](#) for additional information.

Risk Level of Sport Activity	Examples
High risk - Sports that involve close, sustained contact between participants.	Rugby, boxing, judo, karate, taekwondo, wrestling, pair figure skating, football, group dance, group cheer.
Medium Risk - Sports that involve some close, sustained contact, but with protective equipment in place between participants OR intermittent close contact OR group sports OR sports that use equipment that cannot be cleaned between participants.	Lacrosse, hockey, multi-person rowing, multi-person kayaking, multi-person canoeing, water polo, swimming relays, fencing, cycling in a group, running in a close group, group sailing, volleyball, soccer, basketball, baseball/softball, short track.
Low Risk - Sports that can be done individually, do not involve person- to-person contact, and do not routinely entail individuals interacting within six feet of one another.	Archery, badminton, shooting/clay target, individual running events, individual cycling events, individual swimming, individual rowing, individual diving, equestrian jumping or dressage, golf, individual sailing, weightlifting, skiing, snowboarding, tennis, individual dance, pole vault, high jump, long jump, marathon, triathlon, cross country, track and field.

Travel

Sports teams should follow [travel recommendations](#) set by the Centers for Disease Control and Prevention (CDC), including those related to testing, quarantine, vaccination, and masking.

Resources

- COVID-19 Activity Level Reports: <https://www.state.nj.us/health/cd/statistics/covid/>
- NJDOH Recommendations for Screening Testing in Schools: https://www.nj.gov/health/cd/documents/topics/NCOV/K-12_screening_testing_guidelines.pdf
- NJDOH Minimum Quarantine Timeframes: https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_updated_quarantine_timeframes.pdf
- NJDOH guidance on improving ventilation and indoor air quality: <https://www.state.nj.us/health/ceohs/>
- COVID-19 Testing sites: <https://covid19.nj.gov/pages/testing>
- COVID-19 Vaccination sites: <https://covid19.nj.gov/pages/vaccine>
- NJDOH COVID-19 Education Materials (General): https://www.state.nj.us/health/cd/topics/covid2019_community.shtml
- NJDOH COVID-19 Vaccine Education Materials: https://www.state.nj.us/health/cd/topics/covid2019_vaccination.shtml