

Vermont Department of Health

Recommendations for Summer Camps

For H1N1 Novel Influenza Prevention and Control

Novel influenza A (H1N1) continues to circulate in Vermont and in most other states and many other countries. Novel influenza A (H1N1) is thought to spread in the same way that seasonal influenza viruses spread, mainly through the coughs and sneezes of people who are sick with the virus. While most people who get influenza recover without complications, it can sometimes be more severe, especially in the following individuals:

- Children and adults who have heart disease, asthma or other lung diseases, kidney disease or diabetes
- Children and adults who have medical conditions such as heart, lung or kidney disease, asthma, diabetes, obesity, and any condition that causes suppression of the immune system
- Pregnant women
- Children under 5 years of age (especially those under 2 yrs of age)
- Adults age ≥ 65 years of age

Camp staff should ask parents/guardians to inform the camp if their child is at high risk for influenza-related complications. Parents of high-risk children should discuss with their child's health care provider what they should do if their child is exposed to or develops influenza-like illness during camp.

To decrease the risk of H1N1 novel influenza transmission in the camp setting, the Vermont Department of Health (VDH) recommends that camps implement the following recommendations for campers and staff:

Before campers arrive

- Contact parents/guardians, if possible, prior to the start of camp to ask if campers have had influenza-like illness (see attached checklist) in the seven days prior to their camp start date. **Campers or camp staff who are ill with flu symptoms should not attend camp until 7 days after the onset of symptoms or for 24 hours after symptoms have resolved, whichever is longer.**
- Obtain contact information for a parent or guardian who can pick up the child from camp if necessary.
- Ask parents/guardians to inform the camp if their child is at high risk for influenza-related complications.
- Identify a room or cabin that is separate from others where camp staff or participants can stay if they develop flu symptoms.
- Develop a training program for camp staff with specific information on how to recognize influenza symptoms and how to report possible cases of influenza to camp leadership.

Screening upon arrival at camp

- Screen campers and staff for flu symptoms as they arrive at camp. A checklist is provided to help with this process. Campers or staff who have influenza-like illness should be sent home, if possible, or be kept separate from healthy campers and staff for 7 days after the onset of symptoms or for 24 hours after symptoms have resolved, whichever is longer.

- All campers and staff should be asked if they have had household contact with individuals ill with influenza during the previous 7 days. This information should be documented and people with exposures should be asked to report any influenza symptoms immediately to camp staff.

Prevention measures

- Wash hands frequently and thoroughly with soap and water or an alcohol-based sanitizer (if there is no visible soil on the hands).
- Cover coughs and sneezes with a tissue, or sneeze and cough into the crook of the arm if tissues are not available. Wash hands after coughing or sneezing or use hand sanitizer.

Response to ill campers or staff

- Campers and/or staff who develop flu symptoms should be immediately separated from the general population and kept away from well campers until they can be safely returned home or taken for medical care, if needed, OR for at least 7 days after symptoms began or 24 hours after symptoms resolve, whichever is longer (if the child is to remain at a residential camp).
- Camps should have a designated medical provider or medical facility for campers or staff who become ill and may need to be medically evaluated during camp sessions.
- Determine whether you have adequate facilities to house ill campers and staff. Consider whether you will take care of campers and staff on site or send them home for care via appropriate transportation. Plan logistics for transportation of ill persons for medical care or return home that limits exposures to other persons, and multiple ways to contact parents/guardians. This consideration will depend in part on the length of the camp session and whether a parent/guardian can pick up the child in a private vehicle.
- Consider whether you have adequate trained staff to care for many ill people. Only designated staff should take care of ill people. Staff with underlying medical conditions that put them at risk for flu complications should not be assigned to provide care.
- If caring for campers on site, house ill campers and staff separately from well campers. If possible, designate a separate bathroom for ill people. If individual rooms for ill persons are not feasible, consider using a large room, cabin or tent specifically for ill persons with beds at least 6 feet apart, and, if possible, with temporary barriers between beds.
- For proper technique for caring for an ill person, refer to the attached guidelines “Instructions for Suspected, Probable and Confirmed Swine Influenza Cases.”
- Clean bathrooms and other common areas regularly. Focus on surfaces that are touched frequently by hands, such as door knobs, toys, sports equipment, table tops and computer keyboards.
- Use appropriate infection control measures to keep staff healthy. Surgical masks and gloves should be worn when staff are in close contact with ill people. Staff should perform hand hygiene frequently.
- Launder linens, sleeping bags and dirty clothing that belong to sick people in hot water.
- Contact VDH at 802-863-7240 for recommendations regarding control measures if campers or staff develop influenza-like illness.

Please see www.cdc.gov or www.healthvermont.gov for additional guidance and information about the novel H1N1 influenza virus.