

Guidelines for the Prevention and Management of H1N1 Influenza Virus in Summer Camps (Day and Residential Camps)

YUKON VERSION July 3rd, 2009



These guidelines were developed based on the best evidence available. Currently, there is limited information on the transmissibility of the H1N1 virus. As more information becomes available, these guidelines will be updated.

1. Introduction

The H1N1 flu virus that began circulating in the spring of 2009 is a new type of influenza A virus that has not previously infected humans. Infection with H1N1 flu virus results in an influenza-like illness (ILI) similar to seasonal influenza or flu. Symptoms include fever, cough, runny nose, sore throat, body aches, fatigue, and lack of appetite. Some people with ILI due to H1N1 have also developed vomiting and/or diarrhea.

The H1N1 flu virus is thought to spread from person to person in the same way as seasonal flu, mostly through coughing or sneezing. Spread can also occur through contact with surfaces and objects contaminated by an infectious person.

There have been reports of illness among school-aged children within the school setting. With similar age groups typically attending day camps, the risk of H1N1 flu virus spreading in day camps may be similar to what was seen in the school setting. In residential camps the risk of transmission may be higher due to the increased proximity and prolonged contact among campers, staff and volunteers.

2. Definitions

Types of Camps

Although camp settings can be very different, there are common issues regarding health and safety. This document provides guidelines for day camps, overnight camps and special needs camps to help prevent and control the transmission of the H1N1 influenza virus. The risk of transmission of the H1N1 influenza virus will vary depending on the type of camp, number of campers, the type of interaction, activities that the camp offers and the health status of the campers.

- Day camps are camps where campers are dropped off in the morning and picked up at night, and may be in urban or rural settings. These camps may also include excursions / day trips.

The risk of transmission in day camps is similar to that in child care centres or schools.

- Overnight camps have campers sleeping on site for time periods ranging from days to months, and are usually located outside urban centres. They may involve excursions / out-trips. These camps are also called "residential camps."

Overnight camps have a greater risk of transmission due to more prolonged and intimate contact (shared sleeping quarters, shared washrooms, etc.). Overnight camps are also usually farther away from urban centres, without ready access to medical facilities.

- Special needs camps are camps for individuals with medical challenges such as cystic fibrosis, dialysis, or cancer.

Special needs camps have the greatest risk as the campers may have underlying medical issues that may affect their immunity to infection. The risk of transmission in day camps is similar to that in child care centres or schools.

Influenza-like Illness Definition

Influenza-like illness (ILI) is the acute onset of respiratory symptoms with fever and cough and one or more of the following symptoms: sore throat, muscle aches, joint pain, or weakness. In children under 5, gastrointestinal symptoms may also be present and fever may not be prominent.

3. Infection Prevention and Control Practices

Routine infection prevention and control (IPAC) strategies will help reduce the spread of H1N1 influenza virus in all camp settings. These strategies should include:

Physical Layout/Supplies

- Alcohol-based hand rub (ABHR) with 60-90 per cent alcohol, or facilities for hand washing (running water, supply of soap in a dispenser and paper towels) should be located at multiple sites around the camp, in particular in the dining room and other common areas. Young children or others (e.g., cognitively impaired adults) who may ingest the product should be supervised when using ABHR. Ensure safe placement and storage of ABHR by consulting with local fire department. Depending on the type of camp, distribution of ABHR may need to take into account the risk of accidental ingestion of the product.
- Campers should sleep at arm's length from one another, and head-to-foot in bunk beds or in tents.
- Every camp should have a designated area or health care centre, which allows a sick person to be isolated from other campers.
- The designated health care centre should have supplies such as surgical masks and disinfectants to ensure IPAC practices can be followed.

Screening

Not all respiratory illness is ILI. Only those individuals who meet the clinical criteria, as defined in the above section, can be said to have ILI.

Routine screening of campers should be done where they are dropped off or enter camp. Depending on the type of camp, this could be before boarding the bus to camp, or upon arrival at the camp itself. If the child has ILI, he / she should be sent home with a parent / guardian at this point, before exposing any other campers.

At minimum, campers should be asked the following two questions:

- 1) *Are you experiencing any new flu-like symptoms, including cough and fever?*

Campers with ILI should not be allowed to attend the camp. If the camper does not have ILI symptoms ask:

- 2) *Have you been exposed to anyone with these symptoms in the past week?*

If yes, these campers will need closer monitoring and instructions to immediately report if they develop ILI symptoms.

Staff should monitor campers for symptoms of ILI on a regular basis. Early recognition and isolation of campers / staff with ILI can reduce the risk of transmission to others. Staff, parents and campers

should be aware of the symptoms of influenza and the importance of reporting symptoms to camp administrators.

Campers attending day camps should stay home if ill with ILI.

Hand Hygiene and Cough Etiquette

Hand hygiene and covering coughs and sneezes are the most important way to prevent transmission of influenza.

Hand hygiene means cleaning hands either by using alcohol-based hand rub or soap and running water.

At a minimum, campers and staff should be performing hand hygiene after coughing and sneezing into their hands, before communal activities, after using the bathroom and before preparing or eating food.

- ABHR and / or hand washing facilities must be available for campers and staff in easily accessible locations.
- Camp staff should model hand hygiene practices and remind campers to consistently use good hand hygiene practices.
- Camp staff should monitor campers' use of alcohol-based hand rub to ensure it is used appropriately.
- Encourage sneezing and coughing into the forearm / shoulder / elbow and NOT the hands. This will minimize passing droplet contaminants from person-to-person much more effectively than covering sneezes with hands.

Education

- Parents should be given a health and safety information sheet in the orientation package. The sheet should describe symptoms of ILI and camp protocols should a child develop ILI symptoms (i.e., sending child home, emergency contact information from parent(s) / guardians, etc.).
- Camp operators should educate staff and campers on good hygiene practices, including hand hygiene, coughing / sneezing etiquette, and limiting close contact with other campers (i.e., sharing personal items or eating utensils).
- Camp operators should train health care staff and other camp staff on how to monitor campers for flu-like symptoms (fever, sore throat, or cough) and protocols on how to manage a camper / staff with flu-like symptoms.
- The individual in charge of health care should provide current information with respect to ILI symptoms, managements and specific responsibilities for camp staff who are directly involved with the day-to-day activities of campers.

Environmental Cleaning

Clean and disinfect objects and surfaces that are commonly touched by multiple campers/staff such as doorknobs, faucet handles, toys and shared flash lights to prevent the transmission of viruses from person to person through contaminated hands. Regular disinfectants are sufficient for this purpose.

Consultation with Public Health

Yukon Communicable Disease Control (867-667-8369) or the Medical Officer of Health (456-6136) must be contacted if a camper and/or staff member is affected by ILI (that is, fever with cough and one or more of the other ILI symptoms) as this is considered a possible outbreak. They do not need to be contacted for minor respiratory illnesses without fever.

- Camp operators should consult with Yukon Communicable Disease Control for questions related to infection prevention and control, best practices and the latest information on the H1N1 influenza virus. Full contact information is provided at the end of this document.
- Camp operators should have access to health care advice for treatment of campers/staff who experience ILI. This could include documents on how to manage an individual with symptoms of ILI (see “resources” below), how to arrange for emergency care, or an agreement for medical services and consultation by a local health care professional.

4. Influenza-like Illness in Campers or Staff

Recommendations for management of individuals with ILI are different depending on the type of camp.

Day Camps

- Campers/staff who begin to show symptoms of ILI while at camp should be separated from other campers/staff as quickly as possible.
- Campers/staff with ILI should be excluded from the camp until they no longer have a fever and are feeling better.
- While waiting to leave the camp, campers/staff with ILI should be cared for in a designated separate area. If this is not possible, the ill person should wear a surgical mask to cover any coughing and/or sneezing.
- Day camps may not have medical staff on site, but should have a protocol for managing campers with ILI, including notification of parents/guardians who can seek medical attention if required.
- A camp experiencing more than one camper/staff ill or absent due to ILI, is considered to have an outbreak. Yukon Communicable Disease Control or the Medical

Officer of Health must be notified of any outbreaks, and may be consulted for advice at any time.

Overnight Camps

- Campers/staff who begin to show symptoms of ILI while at camp should be separated from other campers/staff as quickly as possible.
- Ill campers may be sent home depending on the severity of the illness, the remoteness of the camp location, the duration of the camp, and at the discretion of camp health care staff and parents.
- Ill staff should be isolated from others as much as possible, and refrain from group activities until they no longer have a fever and are feeling better.
- If a camp has more than one camper/staff ill due to ILI, public health should be consulted to assist with laboratory testing and to advise on control measures. Yukon Communicable Disease Control or the Medical Officer of Health must be notified of any outbreaks, and may be consulted for advice at any time.

Special Needs Camps

- Campers/staff who begin to show symptoms of ILI while at camp should be separated from other campers/staff as quickly as possible.
- Ill campers may be sent home depending on the severity of the illness, the remoteness of the camp location, the duration of the camp, and at the discretion of camp health care staff and parents.
- Ill staff should be isolated from campers and staff, and refrain from group activities until they no longer have a fever and are feeling better.
- Due to the high-risk nature of the campers in this setting, one case of suspect or confirmed H1N1 influenza virus may be enough to be considered an outbreak and trigger control measures such as prevention therapy for close contacts (e.g., cabin mates). Special needs camps should have plans in place to manage individual cases and outbreaks of H1N1 influenza virus to allow for a rapid response.
- Yukon Communicable Disease Control or the Medical Officer of Health must be notified of any cases or outbreaks, and may be consulted for advice at any time.

Precautions for Camp Staff Caring for Ill Campers/Staff

- When providing care to a camper/staff person with ILI, the staff person/nurse as well as the ill individual should wear a surgical mask.

- One staff person should be assigned to care for the ill camper(s)/staff member(s).
- Health care staff or other staff caring for a sick camper/staff should be watchful for emergency warning signs, such as difficulty breathing, that might indicate the need to seek medical attention.
- If a staff member develops H1N1 influenza infection following an occupational exposure in a camp, Yukon Communicable Disease Control and Yukon Workers Compensation and Safety Board must be notified.

Resources

Instructions for hand hygiene and respiratory hygiene (<http://www.fightflu.ca/prot-eng.html>)

Information on care of individuals with ILI, "How to look after someone at home with H1N1 flu Virus (Human Swine Flu)" (<http://www.phac-aspc.gc.ca/alert-alerte/swine-porcine/guidance-orientation-05-03-eng.php>)

Yukon Health and Social Services – H1N1 Human Influenza A: Information and updates including, Summer Activity Flu Prevention for Children – English and French News Release from Public Health Agency of Canada - June 30, 2009 (http://www.hss.gov.yk.ca/programs/nursing/health_officer/swine_influenza/)

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Appendix: Sample information Sheet for H1N1 for Yukon Day and Residential Camps

Health Alert: Flu-like Illness and possible H1N1 influenza

Dear Camp attendees and parents:

Yukon has not seen H1N1 influenza as much as most other areas in Canada. However, public health officials

are working to help Yukoners protect themselves and others from this type of influenza and to prevent the spread of this illness around the territory.

It is important that any child already sick with influenza-like illness (ILI) not attend the camp, or report to camp officials as soon as possible if symptoms occur while at camp. ILI is defined as follows:

Influenza-like Illness Definition

Influenza-like illness (ILI) is the acute onset of respiratory symptoms with fever and cough and one or more of the following symptoms: sore throat, muscle aches, joint pain, or weakness. In children under 5, gastrointestinal symptoms may also be present and fever may not be prominent.

The spread of influenza can be reduced or prevented. Hand hygiene and covering coughs and sneezes are the most important means of prevention of transmission of influenza.

Hand hygiene is the term for cleaning hands either by using alcohol-based hand rub or soap and running water.

At a minimum, campers and staff should be performing hand hygiene after coughing and sneezing into their hands, before communal activities, after using the bathroom and before preparing or eating food.

If a child does become sick, the most important step in preventing spread of the illness is to isolate the child with ILI from others. This means that:

- Sick children should not attend camp.
- Children who become sick while at camp need to report to camp officials immediately.
- Children sick with ILI may be asked to return home.

Camp Yukon will be reporting any illness resembling influenza to Yukon public health authorities.

Otherwise, parents and/or guardians will be informed as for any other health emergency.

Your Camp health official (manager, first aid personnel, etc.) are:

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For further questions, contact (Local Camp Authorities):

For general questions about H1N1 influenza refer to Public Health Agency of Canada (<http://www.phac-aspc.gc.ca/index-eng.php>) or Yukon Health and Social Services (http://www.hss.gov.yk.ca/programs/nursing/health_officer/swine_influenza/) websites.