



## WEA POLICIES INFECTIOUS DISEASES

Western Educational Adventures Inc.  
(250) 888-1622  
[www.westernadventures.ca](http://www.westernadventures.ca)

### Infectious Disease Handling Policy v2.0

Last updated September 19<sup>th</sup>, 2021

Western Educational Adventures (WEA) recognizes the seriousness of respiratory illnesses such as COVID-19, as well as other communicable diseases (including seasonal influenzas). There are measures that schools and childcare settings can take to reduce the risk of transmission of respiratory illnesses including COVID-19. This document describes the procedures implemented by WEA to reduce opportunities for the transmission of COVID-19 and other communicable diseases in outdoor camp settings.

This guidance has been developed based on the BC and Canadian situation using the current available scientific evidence and expert opinion provided by the provincial and federal governments and other experts and may therefore differ from guidance developed by other countries. These guidelines are subject to change as new information on COVID-19 becomes available. For up-to-date information regarding the COVID-19 situation in British Columbia, visit <https://www.bccdc.ca>.

#### ***Primary Focus Mitigation Strategies***

The office of the Provincial Health Officer advises that the two most important ways to prevent and control respiratory viruses, including COVID-19, in schools and childcare (hence outdoor programs) settings are:

##### ***1. The consistent practice of good hand hygiene***

Hand hygiene via washing with plain soap and water is preferred, as the mechanical action of handwashing is effective at removing visible soil as well as microbes. In instances where hand washing sinks are not available, supervised use of alcohol-based hand sanitizers containing at least 60% alcohol may be considered. If hands are visibly soiled, alcohol-based hand sanitizers may not be effective at eliminating respiratory viruses.

Participants and staff should clean their hands:

- i. before leaving home and upon arrival at the program
- ii. after using the toilet
- iii. after breaks and sporting activities
- iv. before food preparation
- v. before eating any food, including snacks
- vi. before leaving for home from the program



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### ***2. The consistent practice of good respiratory etiquette***

Respiratory etiquette includes covering the mouth and nose during coughing or sneezing with a tissue or a flexed elbow and disposing of used tissues in a plastic-lined waste container, followed by hand hygiene.

- i. For students/children and staff who are ill with respiratory illness symptoms (fever, cough, fatigue, and/or muscle aches) to stay home.***

Children who have any of the above symptoms should be kept home.

- ii. Use of masks***

Regular use of face masks by all staff, participants and otherwise while in vehicles or indoor spaces, as practicable will help prevent viral transmission.

- iii. Maintain cleaning and disinfecting policies***

Regular cleaning and disinfecting of objects and high-touch surfaces (e.g. door handles, water fountain push buttons) will help prevent the transmission of viruses.

- iv. Reinforce food and container sharing policies***

It will be important to reinforce “no food sharing” policies in WEA programming. The practice of not sharing food will support the efforts of reducing virus transmission between participants. Participants should not share utensils, dishes, and water bottles/drink containers.

- v. Keep parents/caregivers informed about measures the WEA is taking***

It is important for WEA to keep parents/caregivers informed of what they are doing to protect participants including how they are preventing the spread of respiratory infections.

- vi. Individuals/families required to self isolate or to self-monitor***

Participants are required to self-isolate (stay at home) if they are confirmed to have any respiratory illness (including COVID-19), are exhibiting symptoms of or are at higher risk of developing the disease (for example, due to close contact with a case).



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Others at lower risk of developing the disease will self-monitor daily for symptoms. Individuals who are self-monitoring can attend programs and participate in regular activities.

When participants/staff have completed a 14-day period of self-isolation without developing COVID-19, they can return to full activities and recommence any scheduled activities in childcare programs and outdoor education programs. Individuals who are self isolating do not require a doctors note to return to courses, and will receive personalized instructions from health care professionals on when it is safe to return to social settings, and as such do not require further instruction from WEA regarding special monitoring or other procedures.

### ***vii. Manage participants with possible COVID-19***

If a participant or staff member who begins to experience symptoms (e.g. fever, cough, sore throat, shortness of breath, fatigue, headache, muscle aches) of any respiratory illness (including COVID-19) or another communicable disease/virus while attending a WEA children's program, the ill child or staff member will be:

- Promptly moved to an area separate from others, with adequate supervision until they can go home. If possible, the student should be placed in a separate room from other participants/staff with a closed door. Any rooms they have been in while symptomatic should be cleaned and disinfected before others enter them.
- situated two meters away from others.
- instructed to wear a surgical mask. If the child is not able to comply or there are no appropriately sized masks available, the adult(s) caring for them should wear a surgical mask. If a mask is unavailable the participant should be instructed to cover their mouth and nose with a tissue or cloth when coughing or sneezing.

### **WEA PROCEDURES TO MITIGATE RISK OF TRANSMISSION OF COMMUNICABLE ILLNESSES**

1. Constantly monitoring and adhering to government guidelines that are applicable to our industry/programs, such as those above that are relevant.
2. Following government policies on whether childcare facilities can run or not. If schools and/or day cares are operating, WEA will be operating. If they are closed, WEA will likely shut down too.
3. Capping our programs at a maximum number of groups and participants per group depending on government recommendations and regulations.



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4. Consulting local healthcare professionals and government regarding when we should consider closing.
5. Requiring the use of face masks while in indoor spaces and vehicles as practicable.
6. Bleaching all surfaces hard surfaces on transportation each time participants ride it (typically twice per day).
7. Sanitizing our communal equipment daily or after each use (depending on the current issues)
8. Several mandatory hand washings daily with soap and water, in addition to hand washing before all meals and after bathroom use.
9. No sick participants or staff may attend WEA programs. If participants show up sick, they will be immediately separated from the group and sent home.
10. If a viral threat such as COVID-19 (or otherwise) is of enough concern, no one in the participant's/staff member's dwelling or whom the participant interacts with may be showing symptoms of being sick or have a confirmed case of the illness. Participants or staff will be immediately isolated and sent home if this is discovered to be the case.
11. Promoting "social distancing" if necessary/applicable by constantly reminding children to:
  - a. Remain 2m apart or whatever social distance is recommended by health authorities. This includes things like holding hands, etc.
  - b. Not share their food, water, etc. with other children
12. If applicable or necessary, all staff and participants will:
  - a. Wear the recommended PPE for the particular situation.
  - b. Have gone through the entire duration of a quarantine period, such as 14-days of self isolation for COVID-19.
  - c. Be screened and provide proof of said screening before entering a program.
13. If applicable and necessary, we may opt to run multi-day overnight camps where participants are not allowed to have physical contact with their parents or outside people. This is to ensure the group remains isolated from said disease.

While this list is extensive, it is not comprehensive, and we may take additional measures as necessary.



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### **Please be advised:**

We are working with children in an outdoor environment. We do our absolute best to follow the above policies, but it is unrealistic to say they happen 100% of the time. Children constantly must be reminded of any rules, etc. in a normal setting. Times where infectious diseases are prevalent are no different.

1. We expect parents to reinforce all actions to prevent communicable diseases while at home with their children. Children need to be reminded of safe health and hygiene practices while in the home setting as well, in order to maintain our social responsibility to each family involved in our programs.
2. Your child may still contract the disease despite WEA's best efforts.
3. By agreeing to our terms and conditions, you acknowledge having read and agreed to conditions and procedures mentioned in this document.

### **A note on refunds, credits & transfers do to COVID-19**

If, in the unlikely event a program is cancelled due to COVID-19, we will do our best to issue credits to all families registered for said program. Other options and solutions may be available. If you have any questions or concerns regarding refunds, credits & transfer due to COVID-19, please contact us.