

## Connecticut Yankee Council is adopting the following guidelines for ConnJam 2022

## **General Guidance**

- The use of face masks by individuals is optional. Face masks should not be worn in or near water, while eating, or while sleeping.
  - Signs will be posted at all entrances to ConnJam, as well as on each door to the High Plains Community Center stating that masks are optional.
  - Staff members at the food service pavilion serving the public should wear PPE, including masks
     & gloves.
  - o Managers of program areas, where close contact cannot be avoided, <u>may require</u> staff members AND participants to wear masks in and around those program areas.
- Each member should Be Prepared and have clean and dry face masks available to wear, as needed.
  - o Masks may be appropriate in places where social distancing is not possible, or first aid stations.
- Participants should maintain social distancing where possible, particularly in lines for food service and program events. Tables & chairs in Food Service, Midway, and Trade-O-Ree will be arranged to allow for distancing.
- Cleaning and Disinfecting:
  - o Hand Wash Stations will be at key locations at ConnJam. NO DISH WASHING will be permitted at these hand wash stations **NO EXCEPTIONS**.
  - Hand sanitizer will be at key locations throughout ConnJam, including Registration, Food Service, and "high touch" program areas.
  - o Program areas with high touch surfaces will coordinate appropriate disinfecting of surfaces.
- Units must also follow any additional guidelines imposed by chartered organizations.
- The BSA "Model Pre-Event Medical Screening Checklist" has been updated for ConnJam, effective
  April 15, 2022, attached. The Council recommends use of this checklist prior to arriving at ConnJam.
  Unit leaders (including parents of families camping at the event) shall maintain a copy of the
  completed form for each participant. Forms will only be collected at registration for day
  participants.
- Unit leaders must report, within 12 hours, confirmed or strongly suspected cases of any
  communicable disease infection, including COVID-19, occurring during or within 48 hours after
  ConnJam, to <a href="mailto:camping@ctyankee.org">camping@ctyankee.org</a>. Unit leaders <a href="mailto:are also required">are also required</a> to promptly notify adult
  leaders and parents of all scouts who participated in the activity, as well as the unit's Chartered
  Organization Representative.
- Unit leaders are obligated to work closely with their parents and youth members to ensure that no stigma is attached to ANYONE who chooses to wear a mask. Bullying, harassment, or similar forms of abuse related to masks, violate the Scout Oath and Law and are unacceptable.

## **Overnight Camping**

- While it is a best practice to sleep one person per tent, unit leaders may determine whether to permit additional number of individuals to share a tent.
- Parental permission should be obtained by the unit leader for each youth member sharing a tent.
- When sharing a tent, individuals sleeping next to one another should be arranged head-to-toe.
- Any member using a CPAP machine <u>must not</u> share a tent with other members.



## Connecticut Yankee Council - ConnJam COVID-19 Pre-Event Medical Screening Checklist (Rev 04/15/2022)

Name	:					Unit:			Date:		
			•		•	rticipant their current healt ntering the event must be s			•		
atter	nding Co	onnJa	am wi	ith their ch	ild(r	en) should retain this form.	<b>Do not</b> turn in fo	rm	at registration.		
	Yes		No	Are you currently in quarantine for COVID-19 exposure or due to contact tracing?							
	Yes		No	Are you currently waiting for the results of a COVID-19 test?							
	Yes		No	Are you c	urre	rently ill or have you been ill at any time in the past			st 10 days?		
For u	ınvacciı	nate	d indi	viduals: at	any	time in the past 10 days, ha	ave you				
	Yes	☐ No - been in close contact with anyone known or suspect						h h	ave COVID-19?		
	Yes		No	- been in	close	contact with anyone who i	of a COVID-19 test?				
	Yes		No	- travelled	- travelled outside of the United States?						
If the answer is YES to <u>any</u> question above, you should stay home. If the answer is NO to <u>all</u> questions above, proceed to the symptoms below.											
-		-		-		d has any one or more of the in the household, vaccinate	_		•		
	Shortr	ness (	of bre	eath		Fever of 100 F or more			Cough		
	Muscle or body aches Sore throat			aches		Loss of taste or smell			Chills		
				I		Diarrhea			Fatigue		
	Flu-lik	e syn	nptor	ns l		Nausea or vomiting			Headache		
NOT	E: Pote	ntial	High	er-Risk Ind	ividu	ials					
	Yes		No	•		ding older adults, ual circumstances?					
If the	answe	er is \	YES, v	ve recomm	nend	you stay home.					
	Yes		No	Have you been vaccinated for COVID-19?			First or only sl	not	:		
							Second sl	not	:		
							First Booster sl	not	:		
							Second Booster sh	not	:		
	Yes Do you have recent r					cent negative COVID-19 test?	Test Da	ate	·:		
		,									