

COVID-19 PRINCIPLES AND EMERGING PRACTICES FOR BRITISH COLUMBIA WILDERNESS EXPEDITIONS

** This document is an appendix to the COVID-19 Principles and Emerging Practices of the Canadian Led Outdoor Activity (LOA) Sector*

This guidance document is informed by [BC's Restart Plan: Next Steps to Move BC Through the Pandemic](#) and the [BC COVID-19 Go-Forward Management Strategy](#), and is also in keeping with [BC's COVID-19 Go-Forward Management Checklist](#) and information on [WorkSafe BC's COVID-19 Information and Resources](#); [BC Centre for Disease Control Tools and Strategies](#) and [COVID-19 Frequently Asked Questions](#) and websites.

Please review Provincial Health Officer Orders to ensure compliance (i.e.) [Food Services Establishments and Liquor Services](#).

This document provides interim guidance for wilderness expedition services to prevent the transmission of COVID-19 and maintain safe and healthy environments for children, youth, adults and staff during *BC Restart Phased Planning*. Experts in wilderness programming from across BC who represent the private sector, not-for-profit organizations, public education, post-secondary education, community service groups, and social service organizations also have developed and reviewed these guidelines.

Expedition Leader is a term referencing employees who may also be referred to as an Field Leader, wilderness guide and/or outdoor educator.

About Us

The wilderness expedition and backcountry travel industry (Led Outdoor Activities) operates on proven real-world strategies and safety protocols which ensure the health and safety of staff and participants. As a sector, LOA already recognizes and manages a host of transmissible infections from a variety of vectors including environmental, fecal-oral, topical, and respiratory. A large body of academic literature and field expertise recognizes that risk and uncertainty are central features of the physical, psychological, and social benefits of LOA. As such, providers accept reasonable levels of consent-based risk in their work and have developed operating standards and best practices for managing risks including the transmission of infection.

Wilderness Expeditions have distinguishing characteristics:

- **Multi day** (typically range from 3 to 28 days)
- **Majority of time travelling through outdoor environments**
- **Tent or tarp camping**
- **Adaptive and responsive** to changing environmental conditions and terrain
- **Small group focused** (i.e. 8 to 12 participants with two Expedition Leaders)
- **Front to backcountry travel** (away from populated areas and generally more remote)
- **Outside food preparation area**
- **Mobile, contained, and organizationally supported groups**
- **Independent and competent when in backcountry**
- **Readiness and risk management designed**
- **Group composition ranges from adult, family, youth and specialization** (children participating in wilderness training) **groupings**

Wilderness Expeditions are not to be conflated with [children and youth overnight camps](#) as wilderness expeditions have different operating frameworks. Consequently, the Public Health Officer's orders concerning these camps does not apply.

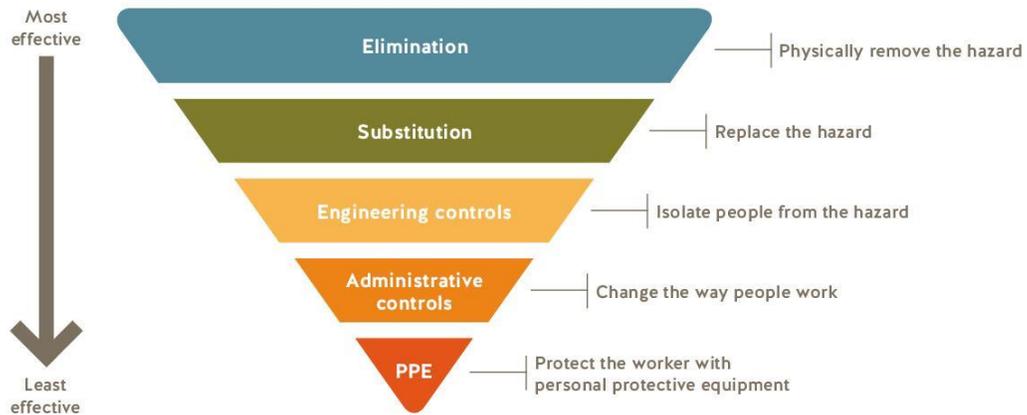
The decisions needed, changing concerns, and evolving awareness of COVID-19 is a multi-layered and complex challenge for which wilderness expedition providers are well prepared.

Wilderness Expedition Providers use the Following Sources as Guidance:

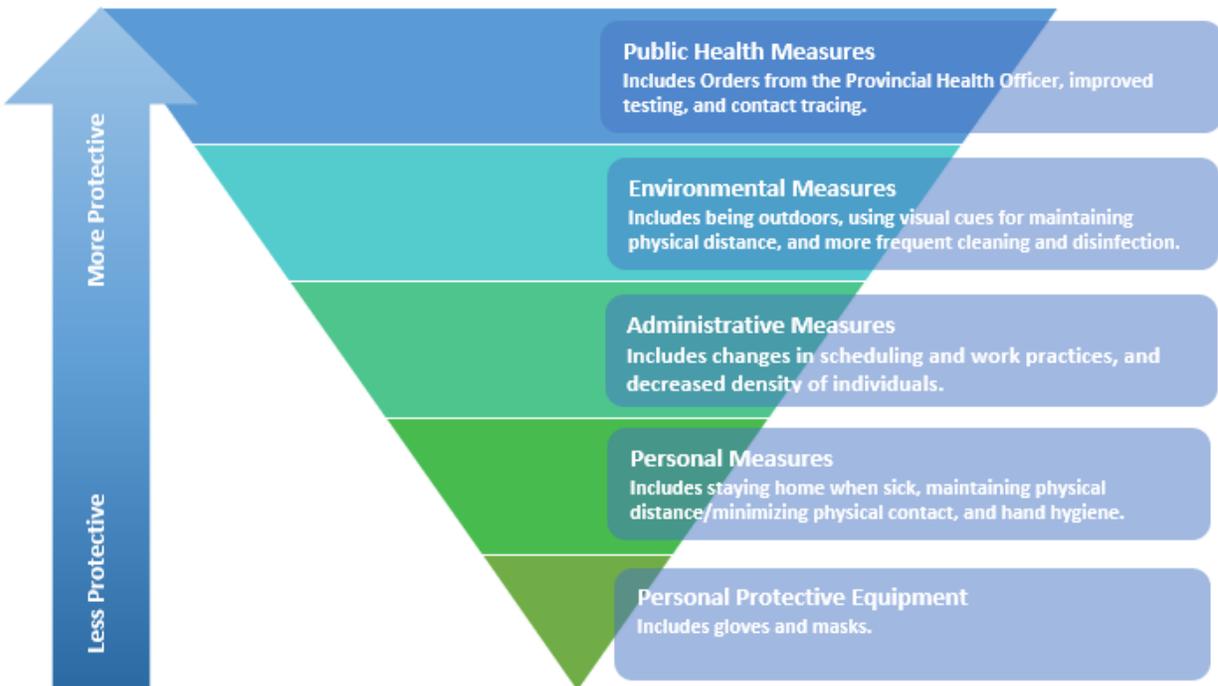
- Government of Canada: [Risk informed decision-making guidelines](#)
- [WorkSafeBC FAQ WorkSafeBC COVID Safety Plan](#)
- [WorkSafeBC Resources](#)
- [WorkSafeBC Protocols for Parks](#)
- [Public Health Industrial Camps](#)
- [WorkSafeBC First Aid attendant COVID protocols](#)
- [WorkSafeBC Exposure Control](#) and [sample](#) exposure control plan for biological agents
- [COVID-19 BCCDC Guidance for Child Care Settings](#) (family group expeditions reference)
- [BCCDC Priority Populations](#) reference for diverse populations

The context in which these principles are employed follow WorkSafeBC's ["Hierarchy of Controls" model](#).

Hierarchy of controls



The Hierarchy for Infection Prevention and Exposure Control Measures for Communicable Disease



WHAT YOU NEED TO KNOW ABOUT COVID-19

What is COVID-19 and how is it spread?

- Coronaviruses are a large family of viruses found mostly in animals. In humans, they can cause diseases ranging from the common cold to more severe diseases such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS).
- The disease caused by the new coronavirus has been named COVID-19.
- COVID-19 has been declared a global pandemic. • COVID-19 is a reportable disease and the local Medical Health Officer must be notified if there is an outbreak or suspicion of an outbreak.
- Coronavirus is transmitted via liquid droplets when a person talks, coughs or sneezes. The virus can enter through these droplets through the eyes, nose or throat if you are in close contact.
- The virus is not something that comes in through the skin.
- It can be spread by touch if a person has used their hands to cover their mouth or nose when they cough. That's why it is recommended to cough or sneeze into your elbow and wash your hands regularly.

What are the symptoms of COVID-19?

- The symptoms of COVID-19 are similar to other respiratory illnesses, including the flu and the common cold. These symptoms include cough, sneezing, fever, sore throat and difficulty breathing. Additional symptoms may include muscle aches, fatigue, headache, loss of appetite, chills, runny nose, nausea and vomiting, diarrhea, loss of sense of smell or taste.
- People infected with COVID-19 may experience little or no symptoms, with illness ranging from mild to severe.
- Some people are more vulnerable to developing severe illness or complications from COVID-19, including older people and those with chronic health conditions.

Risk Assessment Principles for Wilderness Expeditions

Public Health Measures are actions taken across society to limit the spread and reduce the impact of COVID-19. The Provincial Health Officer has implemented public health measures, including: prohibiting mass gatherings, requiring international travelers to self-isolate upon arrival in B.C., effective case finding and contact tracing, and emphasizing the need for people to stay home when they are sick.

Environmental Measures are physical changes in the setting that reduce risk of exposure by isolation or ventilation. Examples include being in outdoor spaces, having good ventilation and air exchange, using visual cues for maintaining physical distance, erecting physical barriers where appropriate and frequent cleaning and disinfection.

Administrative Measures are measures enabled through the implementation of policies, procedures, training and education. Examples of these include changes in scheduling and work practices, and decreased density of individuals.

Personal Measures are actions individuals can take to both protect themselves and others. These include staying home when sick, physical distancing, minimizing direct physical contact, respiratory hygiene, and hand hygiene.

Personal Protective Equipment (PPE) is the last and least effective of the infection prevention and exposure control measure and should only be considered after exploring all other measures. PPE is not effective as a stand-alone preventive measure, should be suited to the task, and must be worn and disposed of properly. Outside of the healthcare settings, the effectiveness of PPE is generally limited to protecting others should you be infected.

Complete COVID-19 Safety Plan

1. Conduct a COVID-19 Workplace Risk Assessment of each wilderness expedition operation and area of travel
2. Implement measures to reduce risk
 - a. Maintaining physical distancing
 - b. Avoid close greetings
 - c. Establish a group pod and limit outside contact with others including with expedition support staff
 - d. Set clear safety group expectations and share relevant information with participants
3. Develop Policies and Review
 - a. Establish, train, and monitor all practices related to safety and hygiene
 - b. Ensure practices are carried out as scheduled
 - c. Review your organizations 2020 policy and procedures, insurance coverage, legal documentation, and membership accreditation if applicable
4. Develop Communication Plans and Training
 - a. Ensure employees are kept informed, and fully understand, expectations around hygiene, company policies, safe work practices, and protocols will ensure better compliance

- b. When travelling in remote locations employees are to have means of communication (e.g., satellite phone)
 - c. Post signage, including [occupancy limits](#) and effective [handwashing practices](#)
 - d. Training and education will be provided to all employees, contractors, service providers, visitors, or other parties that enter the premises and throughout wilderness expedition travel
 - e. Training includes safety measures and procedures, physical distancing, proper hygiene practices, and monitoring and reporting illness
 - f. Emphasis should also be given to employee training regarding trauma informed practices when working with children, youth, and vulnerable populations
 - g. Focus is employee readiness and preparedness
5. Continuously monitor group experience and update expedition plans as needed
 6. Assess and address risks as needed

Additional Resources:

- [Risk-informed decision-making guidelines for workplaces and businesses during the COVID-19 pandemic:](#)
- <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/risk-informed-decision-making-workplaces-businesses-covid-19-pandemic.html>

WorkSafeBC provides an exposure control plan guide at:

- <https://www.worksafebc.com/en/resources/health-safety/exposure-control-plans/exposure-control-plan-for-infectious-disease-for-occupational-first-aid-attendants?lang=en>. (Nov, 2019)

Mass Gatherings

The Provincial Health Officer's [Order for Mass Gatherings](#) continues to prohibit gatherings and events of people in excess of 50 people. As such, there can be more than 50 children and staff at any given setting if they are not all in one area and if they are actively engaged in physical distancing to the greatest extent possible. It is common practice in LOA and Wilderness Expeditions do not exceed 12 people (ie, a pod) in total when travelling in the backcountry.

Case Finding, Contact Tracing and Outbreak Management

Active testing of people with mild COVID-19 like symptoms (case finding) helps identify cases early in the course of their disease, determine whether others in close contact with them are at risk for infection (contact tracing), and ensure they get appropriate care and follow-up. Should a COVID-19 positive person be identified by public health staff, significant efforts are undertaken to determine if they are part of a cluster of cases or part of a local outbreak. Specific public health measures are implemented in facilities where an outbreak occurs to prevent further transmission of COVID-19 and keep others safe.

Self-isolation and Quarantine

Should participants or staff have symptoms similar to the common cold, influenza or COVID-19, they must stay home, be assessed by their health care provider and tested for COVID-19. When someone is symptomatic, they should self-isolate and follow directions provided by their health care provider. Anyone who is a close contact will be given instructions by public health and should follow those instructions.

If a person is found to be a confirmed case of COVID-19, public health staff will ensure there is robust contact tracing and management of any clusters or outbreaks. They will also ensure that participants have access to health care providers and that appropriate supports are in place.

Risk Reduction Measures

Wilderness expeditions are conducted almost entirely outside and travelling through isolated and wilderness areas with ample access to open spaces and ventilation.

- The primary route of COVID-19 transmission is prolonged (more than 15 minutes) close contact with a symptomatic, pre-symptomatic, or asymptomatic infected person. Gathering times such as learning led outdoor activities (LOA) and meals should be conducted outside, organized in a thoughtful way, taking into consideration personal protective measures.
- The secondary route of COVID-19 transmission is through hands that can easily become contaminated. Encourage continuous hand hygiene practices before, during, after outdoor activities by providing access to hand sanitizer and/or soap and water.
- The third, and least common route of COVID-19 transmission is via surfaces that have been contaminated. Potentially contaminated surfaces should be regularly cleaned and disinfected.

Cleaning and Disinfection

Regular [cleaning and disinfection](#) are essential to preventing the transmission of COVID-19 from contaminated objects and surfaces.

- General cleaning and disinfecting of common equipment should occur at least once a day.
- Clean and disinfect any surface that is visibly dirty.
- Participants should clean their personal food utensils, cups, bowls and plates after each meal and these items must remain with the participants throughout the duration of the wilderness expedition.
- Use common, commercially available detergents and disinfectant products. Follow the instructions on the label.
- Wear disposable gloves when cleaning blood or body fluids (e.g., runny nose, vomit, stool, urine).
- Wash hands before wearing and after removing gloves.
- There is no evidence that the COVID-19 virus is transmitted via non-glossy textbooks, paper or other paper-based products. As such, there is no need to limit the distribution of books or paper based educational resources to participants because of COVID-19.

Administrative Measures

Wilderness Expedition Planning

- At the first point of in-person contact with participants, all participants must again self-declare their health status, and be given a COVID-19 orientation by the LOA operator.
- The orientation will include an explanation of the safety measures and procedures, physical distancing, proper hygiene practices, and monitoring and reporting illness.
- These safety measures require the cooperation of all clients through adherence to our policies and procedures.
- A full list of the COVID-19 measures implemented are available on business premise for employees and participants to access.
- A pre-screening questionnaire to ensure the client is healthy before travelling and eligibility to participate.
- A waiver and informed consent to be signed by the participant (guardian if under-age of 18) as part of the liability insurance.
- An orientation message at the first point of contact reconfirming their health and welcoming them to participate.
- Overview and expectation of participants' adherence to the Best Management Practices.
- Prepare an *Outdoor Participants Medical Management Plan* for those with more complex needs that is co-created with the family, and if needed a medical professional (i.e. compromised auto-immunity, epilepsy, diabetes).
- Prepare an *Outdoor Medical Management Plan for Containment and Evacuation*.
- Training for participants will take place in a two-step process, including a pre-screening questionnaire and an on-site orientation.

Typical Participant to Expedition Leader Ratio for Wilderness Expedition Travel

- 7:1 adults to Expedition Leader
- 10:2 adult group to Expedition Leaders
- 6:1 family grouping to Expedition Leader (e.g. two adult parents, 4 children aged 7 - 17 to Expedition Leader)
- 10:2 youth group to Expedition Leaders
- 10:2 specialized group to Expedition Leaders (e.g. children participating in overnight wilderness skills training)

Outdoor Leader and Employer Collaboration

- Worksafe BC requires that companies create a Joint Operations Health and Safety Committee (JOHSC) to address the items below. Safety regarding the risks associated with Covid-19 must be included in these processes.
 - Identify situations that may be unhealthy and concerning while travelling through a wilderness setting
 - Establish agreed communication and emergency protocols while in remote wilderness areas.

- Consider, and promptly deal with complaints of health and safety of employees, participants and community members.
- Review incident report documentation and protocols for exiting participants.
- Co-create daily checklist and monitoring procedures as preventative measures for COVID-19.
- Adjust expedition trips plans accordingly to further minimize contact with public with Expedition Leader input.
- Joint monitoring the controls put in place for efficacy and adjusted regularly.
- Agreement regarding mandatory training and preparation procedures.

Outdoor Leader Responsibilities

- To not come to work if they are feeling ill.
- Maintain a high level of personal hygiene at all times following provincial guidelines
- Follow the health and safety guidelines provided by the employer and Provincial Health Officer for staff, client and facility health and hygiene procedures
- Instruct participant on health and safety procedures
- Inform a manager immediately if, during their shift, they feel ill, self-isolate and remove themselves from the work site when safe to do so
- Monitor participants for signs of illness and, if noticed, isolate them from the rest of the client group
- Inform their manager if there is an incident of illness

Participant Requirements

- Participants must declare any illness to staff
- Participants must maintain a high level of personal hygiene, including frequent hand washing and/or the use of a sanitizer. In addition, respiratory etiquette is essential in preventing the spread of illness. The key elements of respiratory etiquette are:
 - Cough/sneeze into elbow
 - Cleaning hands after coughing or sneezing
 - Cleaning of personal equipment
 - Clothing, backpacks, personal items including eating utensils, towels, hygiene equipment, medication, sleeping bags, tent and sleeping pad. These items should not be shared with others

Common Equipment Cleaned Daily

- High touch surfaces and washrooms should be cleaned regularly and at least once a day. at the end of each day. See: http://www.bccdc.ca/Health-Info-Site/Documents/CleaningDisinfecting_PublicSettings.pdf for guidance.

Outdoor Leader and Participant Accommodation

All participants sleep tent type accommodation during wilderness expeditions. Families, couples and sibling groups may share tents, but all individuals will have their own personal tent for overnight expedition travel.

It is recommended to limit use of dormitory style and/or wilderness cabins accommodation. However, if required, you provide physical distancing measures including

physical barriers and minimum of two metres as part spacing between participants. 'Head-to-toe sleeping recommended.

Outdoor Food Preparation Areas

All expedition food preparation is prepared in the outdoors (i.e. riverbank, trailhead, summit and campsite) and managed by Expedition Leaders throughout duration of the expedition.

- Expedition Leaders to continue to follow organization's Food Safe Best Practices through expedition delivery. Refer to [Canadian Institute of Food Safety](#) and [FoodSafe BC](#) to adjust your expedition food service plan
- Participants should not be involved in food preparation
- Participants should wash their own dishes and kitchen wear
- Ensure hand washing station is set-up and follow expedition hygiene food [preparation guidelines](#):
 - Prepare your menu
 - Wash your hands
 - Clean pots, pans and cooking utensils promptly
 - Keep outdoor preparation surfaces and utensils clean and disinfected
 - Don't share food and drink
- Keep all food preparation areas and locations cleaned, uncluttered and apply physical distancing measures
- All cooking equipment (group and individual) is washed after every use with warm soapy water and if possible air-dried
- Expedition food storage is managed by Expedition Leader(s) to minimize contact from participants. Expedition Leaders are responsible for handling food cache, barrels, bins and food hangs.

Transportation for Employees and Participants– Hygiene, Physical Distancing, Reducing Social Interactions

Employees must work with designated Wilderness Expedition Coordinator(s) regarding travel plans as outlined in the [BCCDC Travel Protocols](#) and [Federal Guidance for School Bus Operations during the COVID Pandemic](#).

It is advised for participants not to travel together to reach destinations but rather independently through their own means. In situations where employees and participants are required to travel together in vehicles to the wilderness expedition location(s), employees and participants will travel in a designated vehicle for the entire duration of travel time. The size of this pod must not exceed the total number of seats in the vehicle.

Proper precautions should be exercised when travelling to and from accommodation and to wilderness expedition to load and offload location, including frequent handwashing and avoiding touching one's own face, maintaining physical distancing, cleaning and disinfecting high touch points like door handles, and minimizing contact with crowds and public places.

Ensure safety protocols are in place in case employees who typically travel alone have a reporting process so that employers know whether they have made it to and from the site safely.

Cleaning Vehicles

At the start of each working day, or after a change of driver, clean and disinfect frequently touched surfaces in the vehicles using an alcohol-based cleaner or disinfecting wipes/spray and paper towel; if these are unavailable, use soap and water. High touch or key contact points include:

- door handles (inside and out)
- window buttons
- steering wheel and controls
- wiper and turn signal handle
- shifter
- dash controls and buttons
- ventilation grilles and knobs
- rear-view mirror
- armrests
- grab handles, seat adjusters, and seat belt buckles
- radio and communication
- vehicle including trailer outside high touch areas
- outdoor safety equipment devices

When more than one employee is traveling, physical distancing practices apply. Shared travel with more than one person should be minimized. Employers may use the following options:

Buses, Vans, Watercraft and Aircraft

- Load and offload passengers by the rear doors if possible or establish a rule that the driver is last-on, first-off of the bus
- Allow for enough time for passengers to disembark from vehicles to allow for adequate distancing and prevent crowding
- Create spacing between riders such as staggering where people sit (e.g. aisle to window, alternating per row)
- Handwashing facilities or sanitizer must be made available before and after the bus ride

Truck & Car

- Where possible limit a single driver in a conventional truck (i.e. single cab)
- A driver and one passenger may travel together in vehicles with two rows of seating. The passenger should sit in the back seat on the opposite side as the driver
- The only exception to this is the work “pod” as described above
- Hands should be washed thoroughly before and after the truck ride and common surfaces should be wiped down before and at the end of each trip

Personal and Group Measures

Physical Distancing

Employers, expeditions operators, employees, and contractors will practice physical distancing and other public health recommendations to prevent the spread of COVID-19.

Physical distancing of at least 2 meters (m) should be maintained as best as possible.

Practical steps to ensure physical distancing is maintained in the following areas:

- while being transported between loading and off loading locations
- during self-propelled travel (i.e. paddling, hiking, etc.)
- during breaks or while in communal spaces and times of gathering
- during all group activities including group meetings held in open spaces or outside

In situations where maintaining physical distance of 2m is difficult, minimize Expedition Leaders and/or participants' time in that situation and provide a physical barrier or wear masks if applicable. Advised to open windows to provide clean air circulation through the vehicle.

Guidance for Increased Hygiene

Frequent hand washing and avoidance of face touching can prevent infection transmission.

Expedition Leaders should support hygiene by reminding participants to cough and sneeze into elbows, avoid touching one's face, and dispose of used tissues immediately, to avoid contaminating their hands. Wash hands with plain soap and water or use hand sanitizer with a minimum 60% alcohol. Wilderness Expedition Operators must provide a suitable hand washing stations for the size of group to use throughout the expedition. Antibacterial soap is not required for COVID-19.

- Hand washing stations with soap and water must be made available to participants while on expedition, as well as before and after meals
- Soap and water hand-washing stations can be supplemented with waterless hand sanitizers with a minimum 60% alcohol where appropriate
- Hand washing periodically throughout the day and especially before and after break times or when work- stations are changed or tools are switched must be encouraged as much as possible
- Hand washing instructions and reminders should be given when required

An important note about First Nations and First Nations Health Centres

- Expedition Leaders who are travelling to, or established near, a First Nations community, must connect with (regional health authorities). First Nations Health Authority to be advised of any current precautions being taken in the region.
- Many First Nations have closed the borders of their traditional territories to anyone, including visitors, from outside their home community. This must be respected, and until the closures are lifted, any incursion onto the land must have explicit and written permission from the elected Chief and Council for that First Nation
- Indigenous populations face heightened health risks due to lower health outcomes compared with non-Indigenous Canadians. First Nations, Métis, and Inuit

populations disproportionately face health disparities linked to the social determinants of health (i.e. social, economic, cultural, political inequities). As such, all employees must respect any precautions being taken to avoid carrying this virus into First Nations communities.

- Expedition Leaders who are travelling to, or established near, a First Nations community, must connect with First Nations Health Authority to be advised of any current precautions being taken in the region.
- It is recommended that participants and leaders do not seek medical care from a local First Nations health center. There are inadequate resources to sustain an influx of external cases.
- If an participant or Expedition Leader who is symptomatic wishes to return to their home in a First Nation community, the First Nation health center should be notified to determine that sufficient resources are in place to support isolation of the individual on arrival.

Wilderness Expedition Suspected and/or Confirmed Exposure Control Plans and Mitigation Strategies:

- **Identify and Assess**
 - Identify symptoms suspect of COVID-19 by observing and conversing with participant
 - Immediate participant physical distancing measures from group (minimum 15-25 feet)
 - Assess participant(s) and record symptoms (date, time, and actual symptoms) in expedition/out-trip log-book
 - Review COVID-19 symptoms, participant intake notes and individual health report
 - Contact, inform and consult with your organization's designated field supervisor and local medical authority for potential COVID-19 guidance
 - Confirm Regional Health Authority's capacity to assist
 - Isolate participant from the rest of the group
 - Consider additional disinfection procedures and wash group equipment as precaution
- **Mitigate, Isolate and Monitor**
 - Follow directives from Regional Health Authority
 - Revise management and expedition travel plan if required considering the potential for a rapid onset of very severe symptoms (typically about 7 days after onset)
 - Continue participant isolation from the rest of the group
 - Monitor participant and group symptoms
 - If participant's symptoms are worsening, call field supervisor and local health authority and activate emergency evacuation plan.
 - If other members display similar symptoms, call field supervisor and local health authority
 - Enact group containment strategic plan for duration of expedition

- **Continue or Exit**
 - Seek guidance from health authority to continue expedition or exit participant and/or group
 - If continuing...
 - Absolutely no physical contact with anyone outside your group
 - Notify Regional Health Authority

- **Post-Expedition**
 - Submit incident report to field supervisor
 - Follow up with participant(s) to ensure quarantining (if required) is taking place
 - Follow up with health authority and await direction
 - Ensure that there is good record-keeping regarding the participant list and contact information should contact tracing be necessary

Personal Protective Equipment

Personal protective equipment, such as masks and gloves are typically not needed in outdoor wilderness expedition setting. However, they are required for indoor situations where physical distancing may not be possible. They may be required in outdoor situations where close contact is required such as for the purposes of providing first aid. They should only be used when all other controls have been fully explored.

- Wear disposable gloves when cleaning blood or body fluids (e.g., runny nose, vomit, stool, urine) and when diapering. Remember to wash your hands before wearing, and after removing gloves
- Cloth or non-medical homemade masks are not recommended. Wearing one is a personal choice. More information about COVID-related mask use is available

A group and/or group may be asked to wear a mask if visiting a remote community or entering a closed setting (e.g. visiting Indigenous community or meeting member of community or entering grocery store to restock supplies)

Additional Information

[COVID-19 and Children](#)

- COVID-19 virus has a very low infection rate in children. In B.C., less than 1% of children and youth tested have been COVID-19 positive. Most children are not at high risk for COVID-19 infection.
- Children under 1 year of age and older children with immune suppression and medical complexity are considered more vulnerable and at higher risk for illness (visit the [BCCDC Priority Populations](#) page for further details).
- Children typically have much milder symptoms of COVID-19 than adults, and youth somewhat milder symptoms, most often presenting with low-grade fever and a dry cough. GI symptoms are more common over the course of the disease, while skin changes and lesions, are less common.
- Many children have asymptomatic disease. However, there is no conclusive evidence that children who are asymptomatic pose a risk to other children or to adults.
- Evidence indicates transmission involving children is primarily limited to household settings, and from COVID-19 positive adults to children. Most cases in children have been linked to a symptomatic household member.
- Clusters and outbreaks involving children and youth are unusual and tend only to occur in areas where there are high levels of community spread.
- Children are not the primary drivers of COVID-19 spread in child-care facilities, schools or in community settings.
- Childcare facility closures have significant negative mental health and socioeconomic impacts on vulnerable children and youth.
- Adolescent children should physically distance themselves where possible when outside the family unit or household.
- For younger children maintaining physical distance is less practical and the focus should be on minimizing physical contact instead.

[COVID-19 and Adults](#)

- While COVID-19 impacts adults more than children, some adults with specific health circumstances are at an increased risk for more severe outcomes, including individuals:
 - Aged 65 and over
 - With compromised immune systems
 - With underlying medical conditions
 - Most adults infected with COVID-19 will have mild symptoms that do not require care outside of the home

Resources

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