



Viristar Risk Management Services

# COVID-19 Self-Assessment for Experiential & Outdoor Program Risk Management

# Introduction

The purpose of this document is to guide organizations in assessing their risk management procedures and practices related to COVID-19, the disease caused by the SARS-CoV-2 coronavirus. Organizations undergoing this self-assessment are expected to better understand, anticipate, manage and respond to risks related to the novel coronavirus.

The self-assessment is intended to be used by outdoor education, outdoor recreation, adventure-based, travel, and experiential education programs, and organizations operating in rural and remote locations.

The criteria noted here do not prescribe specific methods for meeting those criteria. Those methods may vary based on a number of parameters, including activities, locations, and populations, as well as the status of the pandemic in their areas of operation and applicable public health guidelines. However, the intent of the assessment criteria is to outline focus areas for the organization.

Meeting the criteria documented in this self-assessment does not eliminate all risks. The self-assessment tool is not to be relied upon as a sole source of best practice information.

Criteria in this self-assessment are necessarily general, as detailed specifics (such as approved disinfectants, specific distances for social/physical distancing, and processes to support contact tracing, among many others) vary widely per jurisdiction and pandemic severity at any given time.

Organizations wishing to appropriately respond to the COVID-19 pandemic should regularly and closely consult with applicable public health agencies, as well as relevant industry associations and reputable industry peers, qualified legal counsel, and the organization's insurance specialists, for guidance.

# Acknowledgements, Limitations, and Disclaimer

The assessment criteria outlined here are based on multiple sources. Primary among them are the public health guidance provided by the US Centers for Disease Control and Prevention. Other public health agencies and outdoor industry sources have contributed as well. Viristar acknowledges and appreciates the invaluable efforts of public health agencies and others in establishing appropriate public health responses to COVID-19, both in general and specifically for outdoor and experiential programs.

Information in this self-assessment document concerns the rapidly evolving global response to the COVID-19 pandemic. Because research is ongoing and best practices are changing, the criteria here may quickly become out of date. The criteria here are not guaranteed to be complete or accurate. Organizations must use their good judgment in developing policies and procedures suitable for their unique circumstances.

Guidance from public health agencies in the country, state/province/territory, county, city or other jurisdiction is considered to be more definitive than content here, and should be used if public health guidance and criteria in this document do not agree.

The criteria here are summary criteria, and additional information—not provided here—is necessary to establish the appropriate policies and procedures to meet the criteria. Detailed guidance from relevant public health agencies should be consulted for that purpose.

## **IMPORTANT: Disclaimer of Liability**

Persons who use this document and the assessment criteria therein do so at their own risk. Misuse or improper interpretation of this document and the incorporated criteria can result in serious injury, property damage, or death. Illness or other severe loss may occur even if the criteria are met. Viristar LLC denies any legal responsibility to any persons or entities for personal injury, death, or property loss in any way related to the use of, or failure to use, such criteria, including a claim arising out of a deficiency in their establishment or promulgation or publication, or a failure to articulate other criteria. In documenting and distributing these criteria, Viristar LLC does not intend to create legal duties, for itself or for those who would use the criteria, which would otherwise not exist.

# Assessment Criteria

## 1 General Approaches

### 1.1 Guidance from government agencies

- ☐ 1.1.1 The organization has identified the public health agencies relevant to its operations at the local, province/state/territory, national and international level.
- ☐ 1.1.2 The organization has identified the general COVID-19-related public health guidance from applicable public health agencies that apply to the organization's operations
- ☐ 1.1.3 The organization has identified COVID-19-related public health guidance specific to its industry (e.g. travel, outdoor education/recreation, adventure, international, etc.) from applicable public health agencies, that apply to its operations.
- ☐ 1.1.4 The organization has developed and implemented, and adjusts as needed, policies and procedures for its operations, based on guidance from relevant public health agencies.
- ☐ 1.1.5 The organization has identified applicable COVID-19-related guidance from non-public health government agencies such as regarding commerce, childcare or foreign affairs.
- ☐ 1.1.6 The organization has developed and implemented, and adjusts as needed, policies and procedures for its operations, based on guidance from relevant non-public health government agencies.
- ☐ 1.1.7 The organization takes reasonable steps to stay alert to changes in public health recommendations, requirements, and best practices.

### 1.2 Guidance from relevant industry associations

- ☐ 1.2.1 The organization has identified industry associations or trade groups relevant to its activities (e.g. outdoor recreation, experiential education, adventure tourism, international education, etc.).
- ☐ 1.2.2 The organization has developed and implemented, and adjusts as needed, policies and procedures for its operations, based on guidance from relevant industry associations.

- ☐ 1.2.3 The organization takes reasonable steps to stay alert to changes in pandemic-related recommendations, requirements, and best practices from relevant industry associations.

### 1.3 Best practices from other program providers

- ☐ 1.3.1 The organization collaborates with other providers or organizers of similar outdoor or experiential programming to understand and share best practices and effective procedures for managing risks of COVID-19.

### 1.4 Calibrating responses to pandemic severity

- ☐ 1.4.1 The organization recognizes that, depending on the severity of the pandemic in its areas of operation, significant and potentially challenging institutional changes may be needed.

## 2 Medical Practices

### 2.1 General

- ☐ 2.1.1 The organization recognizes the need to implement a full suite of appropriate health practices, rather than employing only a partial set of best practices.
- ☐ 2.1.2 The organization adjusts medical practices in accordance with the local severity of the pandemic, and for persons with special needs or who need additional support.

### 2.2 Culture

- ☐ 2.2.1 The organization takes effective steps to foster and sustain behavior-influencing beliefs and values among organizational stakeholders such as staff and participants in support of following established public health practices.

### 2.3 Activities and Program Areas

- ☐ 2.3.1 The organization limits sharing of communal spaces and items.
- ☐ 2.3.2 The organization takes appropriate steps to clean and disinfect shared spaces and items between use by different persons.
- ☐ 2.3.3 The organization reduces COVID-19 transmission risks of food service by taking steps such as, but not limited to, having participants bring their own meals, eating in small groups, using disposable food service items, using pre-packaged food instead of buffet or family-style meals, and avoiding sharing food or utensils.

- ☐ **2.3.4** The organization limits exposure to SARS-CoV-2 by modifying programming, for instance by (but not limited to) offering online experiences, socially-distanced short-form programming, distancing-friendly activities, and programming in areas where encounters with others are less likely.

## 2.4 Staff

- ☐ **2.4.1** The organization develops and implements personnel policies to mitigate transmission risk such as return-to-work standards, remote work options, flexible leave options, and modified job responsibilities.
- ☐ **2.4.2** The organization plans for back-up staff to maintain operations in case of potential staff exposure to the virus.
- ☐ **2.4.3** The organization appoints a person to take leadership of handling COVID-19 response at the organization, and provides that person with the necessary resources.

## 2.5 Equipment

- ☐ **2.5.1** The organization employs a system to disinfect items and surfaces, particularly frequently touched items such as door handles, railings, tables, and desks.
- ☐ **2.5.2** The organization disinfects areas used by a sick person prior to re-use, and, if possible, closes off the area for 24 hours before disinfecting.
- ☐ **2.5.3** The organization ensures adequate supplies of cleaning and disinfecting items and personal protective equipment.
- ☐ **2.5.4** The organization takes effective steps to manage air quality to mitigate virus transmission risks, including, but not limited to, a) prioritizing outdoor over indoor activities, b) increasing indoor ventilation by opening doors and windows and using fans when feasible, c) when feasible, using high-efficiency air filters in HVAC systems or on a stand-alone basis, d) using technical guidance from HVAC specialist entities (such as ASHRAE, American Society of Heating, Refrigerating and Air-Conditioning Engineers) when appropriate, e) providing physical barriers such as sneeze guards and impermeable partitions, and f) providing physical guides such as markers indicating one-way hallways and distanced queuing.

## 2.6 Participants

- ☐ **2.6.1** The organization employs cohorting when possible, and maintains separation between cohorts (bubbles).
- ☐ **2.6.2** The organization establishes and enforces physical distancing procedures, including, but not limited to: a) regular spacing between

persons per health agency guidelines, b) use of impermeable barriers, c) limiting exposure time to others, d) distanced sleeping arrangements such as head-to-toe sleeping and use of one-person tents/tarps, and e) avoiding encounters with passers-by or others outside the cohort.

- ☐ **2.6.3** The organization effectively encourages individuals to wash hands frequently with soap and water for at least 20 seconds.
- ☐ **2.6.4** The organization supports individuals to use hand sanitizer with at least 60 percent alcohol when soap and water are not available.
- ☐ **2.6.5** The organization requires individuals to cough and sneeze with a tissue, mask or elbow, followed by discarding used tissue and washing hands.
- ☐ **2.6.6** The organization requires mask use, congruent with specific local health agency guidelines, and using the most effective masks reasonably available.
- ☐ **2.6.7** The organization ensures a sufficient supply of masks are in first aid kits and where ever else may be needed.
- ☐ **2.6.8** The organization implements screening procedures, including procedures for persons to stay home if sick, recently had close contact with a person with COVID-19, tested positive for or are showing COVID-19 symptoms, or were exposed to someone with COVID-19 within the last 14 days.
- ☐ **2.6.9** The organization establishes procedures for masks, physical distancing, and other public health measures in addition to screening, in recognition that many individuals infected with SARS-CoV-2 may be asymptomatic.
- ☐ **2.6.10** The organization develops and implements procedures for rapid testing, isolation, transportation, and contact tracing for symptomatic individuals, in conjunction with applicable public health entities.
- ☐ **2.6.11** The organization conducts frequent symptom checks of staff, participants, and relevant others (such as visitors).
- ☐ **2.6.12** The organization conducts COVID-19 testing, following public health agency guidance.
- ☐ **2.6.13** The organization establishes and employs quarantine and transportation protocols for those who may have been exposed to the coronavirus, following health agency guidelines.
- ☐ **2.6.14** The organization provides for enhanced precautions for those at higher risk for illness. This may include, but is not limited to, limiting interaction of older or immunocompromised individuals with other persons, equipment or spaces.
- ☐ **2.6.15** The organization considers selecting participants from the local geographical area in order to minimize transportation-related risks.

## 2.7 Subcontractors

- ☐ 2.7.1 The organization ensures providers or other subcontractors, and outside users of facilities, as applicable, follow appropriate safety procedures.

## 2.8 Transportation

- ☐ 2.8.1 The organization makes plans to minimize risks arising from transportation (including evacuation).
- ☐ 2.8.2 The organization takes steps to structurally minimize transportation, as feasible, for example by changing use of activity areas.

## 2.9 Business Administration

- ☐ 2.9.1 The organization obtains informed consent from prospective participants (and/or guardians/parents of minors, as appropriate) regarding risks related to COVID-19.
- ☐ 2.9.2 The organization establishes and employs communication protocols with health agencies, staff, and family members of those with actual or suspected COVID-19 infection, in accordance with health agency guidelines.

# 3 Systems-Informed Response

## 3.1 Insurance

- ☐ 3.1.1 The organization conducts a skilled review of its insurance coverage, in conjunction with insurance specialists as appropriate, and makes necessary changes. This includes liability, medical, international evacuation/repatriation, business interruption, Directors & Officers, unemployment, worker's compensation, and any other relevant insurance coverage.

## 3.2 Liability

- ☐ 3.2.1 The organization conducts a skilled review of its waiver forms (for example, covering issues including but not limited to acknowledgement and assumption of risk, release of liability, hold harmless, and indemnification), in conjunction with legal counsel, and makes appropriate changes.
- ☐ 3.2.2 The organization reviews cancellation and refund policies to account for COVID-19-related disruptions.
- ☐ 3.2.3 The organization considers affidavits or other documentation regarding pre-arrival isolation, testing or quarantine, in conjunction with legal counsel and public health guidance.



### 3.3 Vaccine

- ☐ 3.3.1 The organization operates with an understanding that a safe, effective vaccine may not be fully distributed for years, and may not be entirely effective or long-lasting, leading to a potential long-term need for physical distancing and other public health measures.

### 3.4 Re-opening

- ☐ 3.4.1 The organization seeks and follows guidance from relevant government authorities and land managers with regards to opening, closing, or restricting business activities and operations in specific programs areas.

### 3.5 Pandemic Root Causes

- ☐ 3.5.1 The organization takes reasonable steps within its capacity to address root causes of the COVID-19 pandemic, such as those involving public health, policy-making, health care, health policy, civic culture, education, social equity, institutional settings, media, and environmental factors.