

Children's Camps

Written Camp Safety Plan Guide



Bureau of Community Environmental Health and Food Protection

(Revised 1/06)

Table of Contents

	PAGE
Introduction	1
I. Personnel	2
A. Chain of Command.....	2
B. Job Description	3
C. Staff Selection and Reference Verification	3
II. Facility Operation/Maintenance	4
A. Water Supply	4
B. Sewage Treatment System	5
C. Lightning Risk Assessment	5
D. Transportation.....	6
E. Housing.....	7
F. Food Protection	7
G. General Operation/Maintenance.....	9
H. Waterfront Facility Maintenance	9
III. Fire Safety	9
A. Evacuation	9
B. Fire Prevention	10
C. Electrical Safety	10
D. Fire Alarm, Detection and Reporting	10
E. Exit Maintenance	10
F. Fire Drills and Log.....	11
IV. Medical	11
A. Duties of Health Director and Staff	11
B. Description of Health Center	11
C. Storage and Administration of Medications	12
D. Universal Precautions.....	13
E. Procedures for Health Care.....	13
F. Camper Medical History and Screening	14
G. Medical Log	15
H. Illness, Injury and Abuse Reporting.....	15
I. Camp Sanitation	18
V. Activity Safety and Supervision	18
A. General Supervision	19
B. Activities-General	20
C. Waterfront Activities.....	20
D. Horseback Riding	24
E. Rope or Challenge Courses	26
F. Archery	26
G. Riflery.....	27
H. Out-of-Camp Trips.....	27

VI. Orientation and Training of Campers and Staff 28

- A. Staff Training28
- B. Camper Orientation/Training28

Appendices.....

- Appendix “A” - Children’s Camp Written Plan Checklist, DOH-2040.....**
- Appendix “B” - Camp Job Description Example**
- Appendix “C” - Lightning Safety Basics.....**
- Appendix “D” - Recommended Immunization Schedule**

INTRODUCTION

Sections 7-2.4(c), 7-2.5(n), and 7-2.25 of Subpart 7-2 of the New York State Sanitary Code (SSC) require camp operators to develop a "written plan" which accurately reflects the camp's compliance with code requirements.

Your written plan should be tailored specifically to your camp's site and program(s), and reflect the camp's policies and procedures (i.e., "per code" is not enough detail!). It should be your framework for decision making, and your risk management tool. While developing your written plan, please refer to Subpart 7-2, this guideline and its corresponding checklist (i.e., Written Plan Checklist, DOH-2040, Appendix "A"), being sure to include all the required plan components (including a Table of Contents) and other plan components for activities or situations that may be unique to your camp. This guideline addresses code requirements and includes recommendations and topic specific informational 'sidebars' to assist you. You may also wish to contact camping organizations and other camping resources for additional information. Allow plenty of time to develop your plan and return it to your local health department so they can review and, if complete, approve the plan.

Annual plan review by the operator is required; updated plans must be submitted to the permit-issuing official (PIO) annually. If no changes are needed, you may avoid resubmittal of the existing plan by notifying your PIO in writing that the plan remains up-to-date and in continued compliance. (Use the Staff and Facility Description form, DOH-367, to provide this notification.) Maintain a copy of your approved written plan on file at your children's camp so you can readily make use of it and note suggestions for changes.

Plan Benefits:

- Creating your written plan will assist you to become prepared to operate your camp in an organized, efficient manner and should aid you to delegate responsibilities to staff.
- Implementation of your approved written plan will assist you to operate your children's camp in a safe manner, in compliance with the code.
- The written plan should become a guide for consistent operation of your children's camp, even if you or other key staff must be absent.
- Preparation of your written plan will require you to think through and establish criteria to follow for potential situations such as a fire, lost camper, medical emergency, staff absences, etc. If a related event should occur, you, your staff, and your campers should be prepared to respond safely and effectively.
- Components of the written plan are useful for staff training and camper orientation, and provide a consistent educational tool to describe your camp's policies and safety procedures.

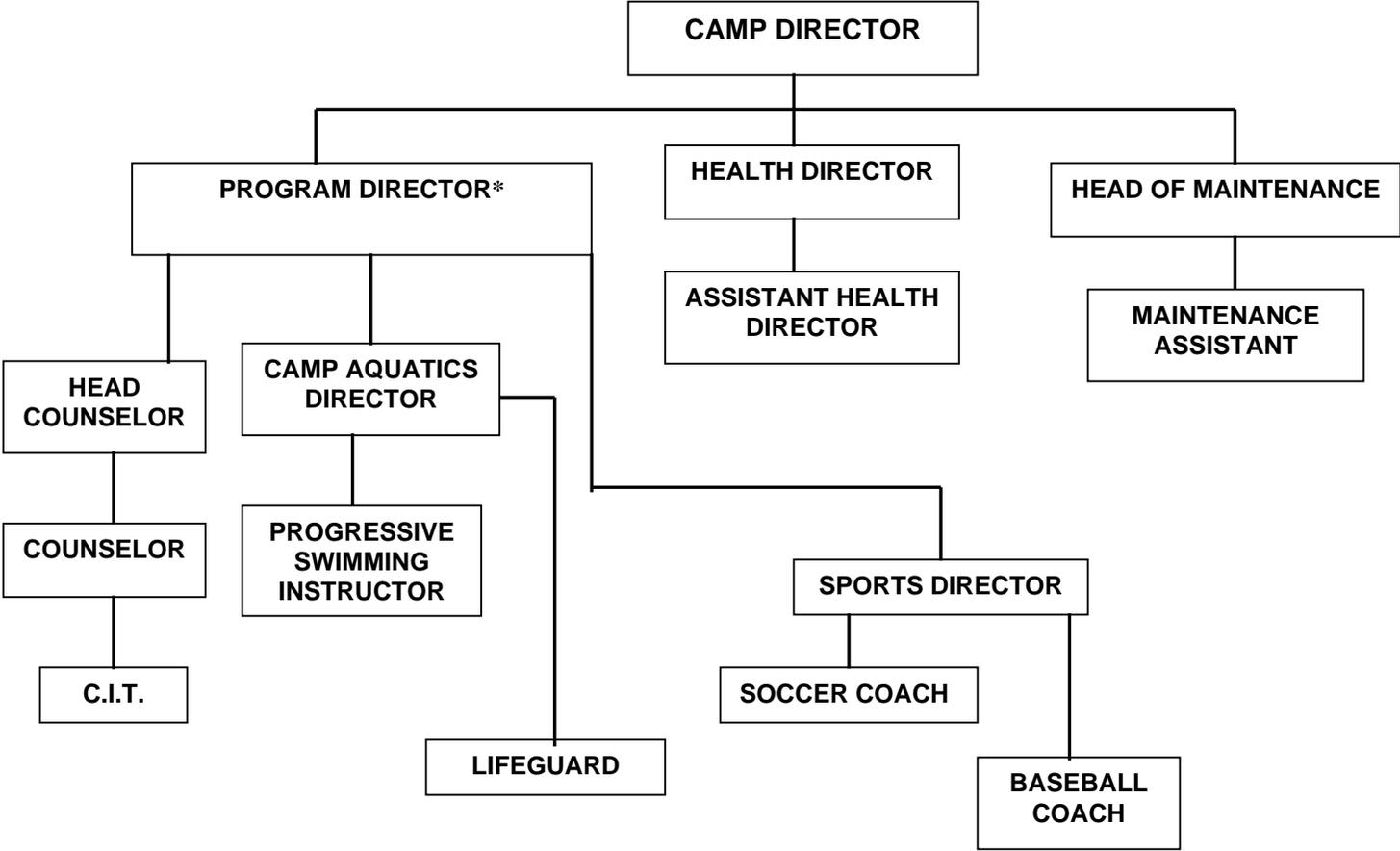
Review your written plan at the opening and closing of camp, and after emergencies occur to determine if the document is up-to-date and effective, or needs revision. Remember to revise your plan to reflect procedural changes and new activities and be certain to update your Table of Contents and submit changes to your permit issuing official.

Encourage key program staff to contribute to the yearly evaluation and, if necessary, update of your written plan during camp. Their knowledge and expertise about developing and providing safe camp programs can be preserved to share for years to come.

I. PERSONNEL

A. Chain of Command

Describe your camp's "Chain of Command." Your chain of command establishes an order of succession of responsibility/authority which becomes particularly important when key staff are unavailable or unable to perform their assigned duties/responsibilities. (If supervisory/evaluation responsibilities differ from this order, show this information separately.) An outline(s), similar to the diagram below, is an effective way to share this information during staff orientation.



* In the absence of the Camp Director, the Program Director will assume the Camp Directors responsibilities.

B. Job Description

Include a description of intended duties and required qualifications for each staff title (not names of individuals) used at your camp in the written plan. There should be descriptions for all staff you hire, including the camp director, counselors, counselors-in-training, specialty activity counselors, drivers, maintenance workers, etc. Each job description should cover qualifications specified in Subpart 7-2 of the SSC and the following:

- Job title.
- To whom the person reports.
- General responsibilities.
- Specific duties (especially those required by your written plan and the SSC; see sections 7-2.5, 7-2.8, 7-2.11).
- Minimum qualifications and/or certifications required. (These must meet SSC requirements for age, certifications, experience, etc., for each position (where applicable). Also, request the brochure, "How to Obtain a Permit to Operate a Children's Camp in New York State" and current "Fact Sheets" for accepted Aquatic, Cardiopulmonary Resuscitation (CPR), and First Aid certifications.)

Appendix B illustrates a typical camp job description.

C. Staff Selection and Reference Verification

How do you interview candidates and verify qualifications and references to select your staff? Include in your written plan a copy of your staff employment application(s) and the steps your camp follows to select staff. (Records identifying staff qualifications must be available at camp for inspection.) Select all staff carefully! It is recommended the application include questions regarding any past criminal convictions and current charges concerning a crime involving children. You should evaluate the specific facts of the conviction or pending case against the prospective staff member and determine if employment as camp staff would involve an unreasonable risk to the property or to the safety or welfare of camp participants or the general public. Screen candidates in person (preferably) or by telephone interviews, asking questions about qualifications for the job, and prior employment history, including experience working with children.

The camp operator is also required to obtain and verify references on the character of all prospective camp staff. Describe the method of reference verification you use. It is recommended you require references in writing from persons not related to the candidate and include questions specific to the candidate's experience with children, work history and reasons (if any) why the candidate would not be appropriate for the position. References should be verified by telephone. Interviews, reference questions, and responses must be documented, filed with employment applications at the camp, and available for inspection.

"References" - excerpted from: "For Their Sake: Recognizing, Responding to, and Reporting Child Abuse." Becca Cowan Johnson, 1992, Martinsville, IN: American Camping Association.

Most employers require at least three references from friends and past employers, and people not related to the applicant, who have known him or her for several years. It is helpful to obtain information from references on the nature of their relationship with the applicant and how long they have known the applicant.

It also is helpful to get a reference's name, position, address, and phone number. The latter information is especially important when a phone call is needed to further clarify the candidate's character and experience.

Some organizations routinely contact references by phone. Often, these reference checks include personal references as well as those from previous employers and/or teachers. Phone conversations inevitably provide helpful information not contained in the reference forms.

In conducting phone reference checks, an employer seeks to find out more about the character and work habits of the applicant. These checks also afford the employer the opportunity to determine whether any information given on the application or during the interview differs from that obtained during the phone calls.

Key questions to ask past employers could include the following: "Would you hire this person again?," "How would you describe this person's character?," "What were the person's strengths and weaknesses, especially in regard to working with children?," "Would you hire this person to care for your own children, if you have any?" and "Are there any problems that might interfere with this person's ability to work effectively with children?"

Although most past supervisors are willing to answer questions, some organizations refer all reference checks to the personnel office. This is especially true in states where past employer statements have been challenged in court. These organizations provide information only to inquisitive future employers - information such as whether the person worked at their organization, his or her job responsibilities, and his or her dates of employment.

Since the references provided by applicants are generally people who have something positive to say, it may also prove helpful to ask for the names of other people who know or have worked with the applicant.

Staff screening and selection are among the most important responsibilities of any employer, due to the fact that the quality of service provided, the clients' safety, and the reputation of the agency are determined by the caliber of the staff members. Therefore, the extra time and care you take in selecting employees and in familiarizing yourself with the characteristics of potential abusers is time well-spent.

II. FACILITY OPERATION AND MAINTENANCE

Include in your written plan provisions for the on-going operation and maintenance of your facility during the camping season. Cover the following items as they apply to your children's camp:

A. Water Supply

- What will you do if the water supply is interrupted or unavailable for more than a few hours? Address this issue regardless of the camp's source of water.

If the camp's water is not supplied by a municipal (public water) system:

- Locate (on your camp map) where wells, springs and/or intake pipes (if a surface water supply is used) are. Indicate the location of any storage tanks and treatment equipment also.
- Identify (by job title) who will be responsible for inspecting the water supply and distribution system for leaks, damage, cross connections, etc. (see self-inspection guidelines available from your local health department). Who will supervise the daily operation and repair of the system?
- Do you need a Certified Water Treatment Plant Operator (CWTPO)? If not sure, ask your local health department.
- If treatment is required for the water to be potable (safe to drink), describe the type of treatment and where it's located, the testing method to verify that the treatment system is working, and the person responsible for testing the water and maintaining the records of the testing results (see your local health department for assistance and the forms to maintain proper records).
- When will you have samples of the water taken and where will they be analyzed? Who will be responsible for collecting and submitting them?

Almost every camping season, an outbreak of gastroenteritis attributed to a children's camp's on-site water supply causes hundreds of campers and staff to become ill. Some of the factors that have been identified as contributing to such outbreaks include:

- adequate disinfection residuals are not maintained;
- there is an interruption of required disinfection;
- the improper development or location of a new well allows contamination; and
- cross-connection of a non-potable water supply (i.e., a lake, unapproved well, etc.) with the potable supply occurs.

Although the effects of waterborne ailments generally aren't severe to healthy campers and staff, and symptoms are of short duration, they usually cause large numbers of victims to become ill during an abbreviated time period, often taxing facilities and staff. Don't allow a waterborne outbreak to be one of your camps most memorable happenings! Develop and implement an ongoing prevention plan.

B. Sewage Treatment System

Address this topic when the camp has its own sewage treatment system. Untreated sewage effluent may contain organisms which cause serious disease, such as Shigellosis and Hepatitis A. Uncorrected, a sewage discharge may contaminate your water supply or bathing beach.

- Describe the type of system(s) you have and show the location(s) on the camp map.
- Does your system require chemical treatment of the effluent? If so, who will test and monitor this system?
- Who will be responsible for periodic inspection for signs of system failure or leakage?
- Identify any components of the system that may be unsafe to walk over. How will you restrict campers and staff from them? (Include this information in staff training and camper orientation.)

C. Lightning Risk Assessment

Estimates made by sources, such as the National Weather Service, indicate that approximately 400 people are struck and seriously injured by lightning each year. One out of four victims is killed. Specify procedures in your plan, to be covered at staff and camper training, to follow for anticipating lightning activity and for taking precautionary measures to minimize the threat from lightning. Use Appendix C to assist you in developing these procedures which should address the following points:

- How will you monitor weather conditions to anticipate lightning activity?
- How will staff be notified of predicted thunderstorm and lightning activity?
- Which activities will be eliminated or minimized in anticipation and response to thunderstorm and lightning activity?
- Where will campers/staff go if their scheduled activity is canceled by a storm?
- What instructions will be provided for those caught away from shelter/camp by a storm?

Lightning Safety

Your plans should instruct staff and campers on when, how and where to safely take shelter during an electrical storm. Additional items to include in the training and orientation sessions include:

- Immediately stop swimming or boating and get out of or off of the water.
- Cease all outdoor activities; seek shelter inside the nearest large building that is deemed safe by a lightning risk assessment (refer to Appendix C). If no acceptable building is available, get into a car or bus.
- Do not use the telephone except in emergencies.
- If shelter is not available or you are en route to a shelter:
 - Stay away from telephone or power line poles and tall isolated or lone trees.
 - Stay off of or leave hill tops.
 - Avoid wire fences, pipes, metal poles, and other good conductors.
 - Stay away from/off vehicles with metal parts, such as motorcycles, ATVs, bicycles, etc.
 - If in a group, stay several yards apart.

For more information, obtain the department's brochure, "Lightning Safety Tips."

D. Transportation

What transportation will you provide to campers/staff? If you provide or obtain transportation services (i.e., vehicle, boats) for your camp, including for out-of-camp travel, describe how you will comply with the code requirements of Section 7-2.10:

- Drivers must be at least 18 years old with a valid driver's license to drive their assigned vehicle(s). Will you have staff assigned as drivers?
- Vehicles must not be overcrowded! Do not exceed the manufacturer's recommended seating capacity.
- When provided, seat belts must be used. Who will monitor this?
- How many counselors will be in each vehicle? How many campers? Is supervision adequate (also see Section 7-2.11(i))?
- Vehicles must be in good repair, be currently registered and bear all inspection stickers required by law (i.e., Department of Motor Vehicles and/or Department of Transportation). Who will be responsible for maintenance of the vehicles you provide?
- Tools, flares, a fire extinguisher, and a first aid kit are required in each vehicle. Who will monitor this?
- Never use truck beds to transport campers! If your camp has open bed trucks, address this issue.

E. Housing

Include the location of residential buildings/tent sites on your camp map.

Many of the complaints received by local health departments from parents are about unsafe or unsanitary housing conditions. Avoid a complaint investigation at your camp: develop/implement a plan to inspect, repair and maintain camper housing and staff quarters prior to, and during the camping season. Identify staff titles assigned to these duties. A system to prioritize and monitor repairs is recommended.

If bats or other animals have taken up residence in camp buildings, have them safely removed, and make repairs to keep them out prior to the arrival of staff and campers.

Reminder:

If you plan renovations or new construction, contact your local building inspector and health department for specific requirements and necessary approvals early in the planning stages and prior to construction. This advice also applies to water supplies and sewage treatment systems.

F. Food Protection

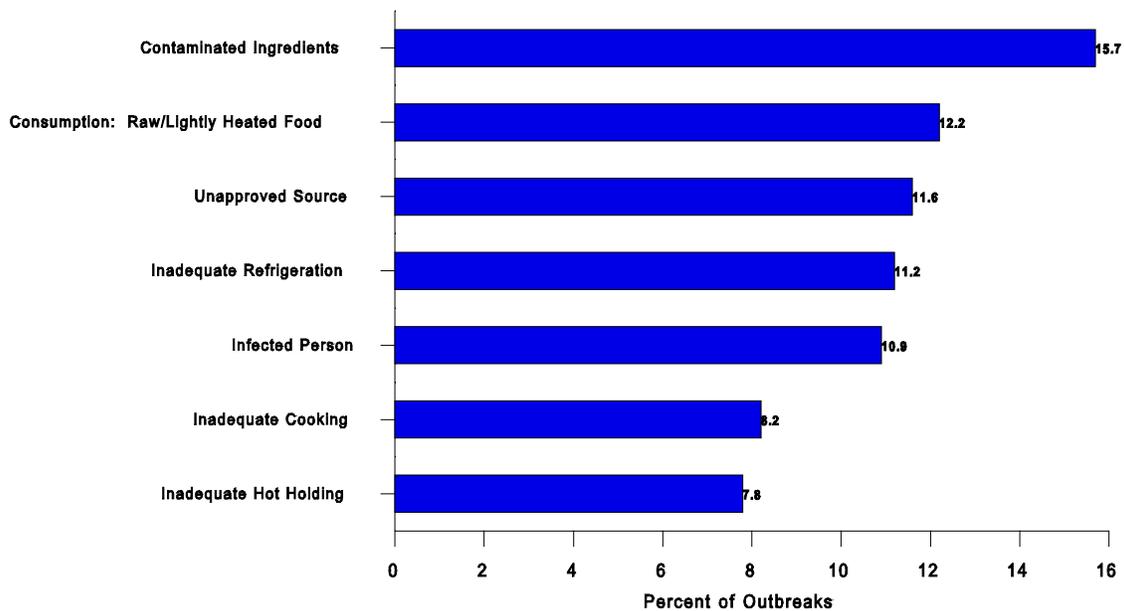
Are your food service staff addressing the common causes of foodborne illness in your camp's kitchen? Foodborne illness has often been identified as the cause of large outbreaks at children's camps. See Section 7-2.19, the sidebar, and obtain a copy of State Sanitary Code Subpart 14-1 from your local health department to help you and the kitchen staff address this plan component.

Address the following in your plan:

- Describe your policy regarding ill food workers.
- What steps will be followed to assure foods are prepared properly and temperature requirements for cooking, cooling and reheating are met? When will the use of disposable gloves or utensils be required? Who will monitor food temperatures and what foods require monitoring?
- If your camp takes out-of-camp trips, describe how food will be transported and list the steps that will be implemented to provide safe meals (e.g., prevent contamination and maintain safe temperatures) for these events?
- Review your camp's menu. Are there any meals that will require the food to be prepared before the day on which it is served? If so, discuss these menu items with your local health department to determine what safety precautions should be taken.
- Who will be responsible for insuring that served foods (e.g., from an individual's plate or from an on-the-table "family style" portion) are discarded and not re-served? Re-service of food previously served to another person is prohibited by the SSC.
- Provide a plan for assuring the food service facilities are clean and in good repair; and identify the staff assigned these jobs.
- Do camp participants bring lunches or other foods to camp? Describe the camp's procedures to protect this food until it is consumed.
- Describe staff training for food protection procedures/sanitation.

Every year, thousands of people fall victim to foodborne illnesses. In New York State alone, between 1980 and 1995, there were 1,893 outbreaks involving 40,985 individuals whose illness was related to food they had eaten. These figures include 1,395 people hospitalized of whom 35 died. The chart below covers the same period of time and illustrates some of the contributing factors in these outbreaks.

Causes of Foodborne Outbreaks in New York State From 1980 to 1995



1/20/99

Eliminating these food preparation problems from your kitchen operation will protect your camp population from the threat of almost all types of foodborne illness. Additional information and assistance in realizing this goal are found in the department's brochures: "Use of Hands in Preparation of Ready-to-Eat Foods," "Cooling and Reheating of Potentially Hazardous Foods," and "Procedures for Safe Storage and Preparation of Eggs and Foods Made With Eggs."

G. General Operation/Maintenance

Describe your camp's on-going operation and facility maintenance program. A written camp operation/maintenance plan, which is followed by the camp operator and staff, adds to the overall health, safety, and welfare of the campers and results in a smoother camp operation by encouraging the cooperation of the entire camp staff. A well planned operation/maintenance program should include:

- A plan to check the camp prior to opening and after storms for damage to power lines, trees, buildings, paths, etc.
- A plan to safely remove bats and other animals from buildings and prevent their reentry.
- The location and regular emptying of trash and garbage cans and plan for rubbish removal from camp.
- A plan to confirm buildings and playground equipment are clean and safe.
- Who will be responsible for cleaning the housing units, toilets, latrines, etc.? If campers will participate in these tasks, list types of cleaners and safety equipment to be used, and indicate how staff will supervise campers.
- A plan for reporting and insuring repairs are done as promptly as possible. Identify who will be responsible.
- A schedule for the routine maintenance of motors, machines, and appliances.
- A plan for ordering, distributing and safely using and storing supplies (i.e., cleaning products, fuel, etc.).

H. Waterfront Facility Maintenance

- Describe how and by whom your waterfront (i.e., decks, docks, float lines, rescue equipment, etc.) will be set up and maintained. Don't forget to include checking water depths and repairing depth markings to be correct and visible, and removing debris from the swimming area.
- For swimming pool(s), who will be responsible for the operation of the filtration system, and testing and maintenance of the disinfection system? For safe storage and handling of chemicals?
- Who will be responsible for inspection and maintenance of boating equipment, such as life jackets, oars, oarlocks, boats, canoes, sails, etc.?

III. FIRE SAFETY

A. Evacuation

This is the most important component of any fire safety plan. Rescuing/removing and accounting for all present must be the first priority. A fire is the most likely reason for the evacuation of buildings or the property. These plans may also be used for other disasters requiring evacuation, such as floods and storm damage. This section of your written plan should cover the following items:

- Who (staff title) will be responsible for coordinating this plan component? (Don't forget to include this duty in the appropriate job description.)
- What signal(s) will be used to alert the camp and initiate a fire drill/ evacuation sequence?
- How and to what location will the occupants of the housing and other camp facilities be evacuated? Include on-site and off-site assemblage locations. If it is necessary to evacuate the camp, what route will be used? Is there an alternate route if the primary route is blocked?

- What method of accounting for campers and staff will be used? How will campers be supervised during evacuation?
- How/when will parents be notified if a fire occurs or evacuation is necessary?
- Who will notify the local health department within 24 hours if a fire occurs or evacuation is necessary?

B. Fire Prevention

- Who will be responsible for removing accumulations of flammable debris (leaves, twigs, etc.) from under tent platforms and buildings?
- How and where will flammable materials such as fuels (gasoline, kerosene), paint, etc., be stored?
- Describe your campfire procedures. Identify who may start a camp fire; include location(s), materials to be used/avoided, methods of extinguishment, and when not to have campfires. (Remember to include out-of-camp trips.)
- Who will be responsible for inspecting and maintaining fuel fired heaters?
- What fire fighting equipment will be provided at your children's camp? Who will be responsible for maintaining and testing this equipment, including fire extinguishers? How often will inspections be made and how will this information be maintained? Where will the equipment be located? Who will be instructed in the use of this equipment?

C. Electrical Safety

- Who will be responsible for checking the condition of overhead electrical and telephone lines, the height and condition of those lines as they enter buildings, and the maintenance of junction and breaker boxes (e.g., keeping covers on the boxes)?
- Who will monitor to see that extension cords aren't used, electrical boxes are covered, electrical switches operate properly, and ground fault circuit interrupters (installed near sinks, pools, on outlets for outdoor equipment, etc.) are tested?

D. Fire Alarm, Detection, and Reporting

- Smoke detectors are required in all sleeping rooms. Additional detection/alarm systems may be required, based on building configuration and construction. What type of fire detection/alarms are used in the housing areas? Who will test and maintain this equipment? What instruction will staff be provided about using this equipment?
- Identify the fire department you would call if a fire occurs. Who will notify the fire department? Where will emergency numbers be kept? (Submit the fire safety section of your written plan to the fire department with a letter providing your operating dates, any special needs of your facility and requesting the fire department's assistance if needed. Invite them to visit your camp site to become familiar with it and insure that their apparatus can negotiate the roads to and within the site.)
- Who is responsible for reporting fires to your local health department within 24 hours?

E. Exit Maintenance

- Identify primary and secondary exits.
- Who will be responsible for seeing that doors are not locked against egress by dead bolts, hooks and eyes, etc., and that exits are marked and the doors swing outward in the direction of egress?

- Who will be responsible for maintaining unobstructed routes of egress to exits and safe assembly area(s)? This is especially important in housing buildings. How wide will the exit paths be between beds, and who will be responsible for maintaining them free of clutter?

F. Fire Drills and Log

Drills must run smoothly and rapidly. Fire drills must be conducted within the first 48 hours of each camp session; if campers arrive late, be certain they receive this training. It is recommended you simulate drills from various buildings, at varying hours with staff prior to the arrival of campers to identify and eliminate potential exiting problems.

- Who is responsible for overseeing fire drills?
- When will fire drills be held?
- Where and how will a record (log) of fire drills, etc., be maintained?

IV. MEDICAL

The contents of this component will vary based on the camp's location (in relationship to health/emergency care facilities), day or overnight status, the medical needs of the campers, the capacity of the camp, and the health director's credentials. The medical plan component must describe the health director's duties based on this individual's level of medical licensure and first aid training, and address the following:

A. Duties of Health Director and Staff

New York State (NYS) Licensed Medical Staff
Only NYS licensed physicians, physician assistants, nurse practitioners and nurses may practice their professions in NYS. Out-of-state-or-country personnel may not practice unless they obtain a limited permit to practice from the Professional Licensing Services of the NYS Education Department, and they practice under the on-site supervision of an acceptable NYS licensed medical professional. Contact the NYS Education Department at (518) 474-3845 for additional information on nurse practitioners or nurses and (518) 474-3841 for physicians and physician assistants.
NYS Emergency Medical Technician (EMT) Reciprocity
Prior to working in NYS as an EMT, out-of-state EMTs must obtain reciprocity from NYS Emergency Medical Services (EMS). To obtain applications/information, contact NYS EMS at (518) 402-0996 or by writing: EMS Program, Hedley Building, 6 th Floor, Troy, New York 12180.

The camp's health director is the individual primarily responsible for the implementation of the camp's medical plan component. At overnight camps, this individual must be on-site; at day camps, the health director may be on-site or represented on-site by a qualified designee, as described in Section 7-2.8(a). The duties of the health director and other medical staff must not exceed their training and/or New York State licensure.

Describe the location of/method to contact first aid and CPR certified staff.

Describe the duties of the Health Director and other staff as they apply in the remainder of this plan component.

B. Description of Health Center

- Describe the health center, including provisions for housing/isolation of campers and their supervision (see Section 7-2.8(b)).

C. Storage and Administration of Medications

- Include the camp's procedures for storage and administration of medications. The following guidance is provided to assist you.

Medications

Upon arrival at camp, campers and staff (housed with campers) must provide their medications (prescription and non-prescription) to the camp's health director or designee.

Labeling - Medications must be checked for the following:

- Medications must be in their original containers.
- All medications must be labeled correctly.

Prescription medications:

- Complete name of patient.
- Date prescription filled.
- Expiration date.
- Directions for use/precautions (if any)/storage (if any).
- Name and address of dispensing pharmacy.
- Name of physician prescribing medication.

Non-prescription of medications:

- Complete name of patient.
- Authorization and instructions for use (i.e., from parent/guardian or individual's physician).

Medication Storage - Medications are to be kept in a secure area (locked) accessible only to the camp health director/designated staff, except when required to be available to the patient for emergency use (i.e., "epi-pen" prescribed for bee stings, etc.). In the latter case, the camper or staff assigned to carry the prescribed medication, must notify the health director or designee when the medication is used.

- Controlled substances (narcotics) and syringes must be "double-locked" (i.e., locked in a box locked in a cabinet, etc.) and stored per product directions (i.e., refrigerated, etc.).

Prescription Medications - Only NYS licensed physicians, nurse practitioners, or physician assistants may prescribe prescription medications, and prescriptions must be written for an individual, i.e., not a bulk supply.

Non-prescription medications - Stock supplies of non-prescription medications (over-the-counter items) may be maintained. "Standing orders," from and signed by a physician, describing use of these items are necessary.

Repacking or relabeling of prescription medications is prohibited.

Change of dosage or the schedule for use of required medications may be made only upon prior written authorization of the camper's attending physician; or in the case of an emergency, by telephone, with a written confirmation from the prescribing physician.

Administration - Medications must be self-administered by the recipient with self-administration witnessed and documented by the camp's health personnel or designee, unless a NYS licensed physician, nurse practitioner, physician assistant or registered nurse is available to perform administration. (NYS licensed practical nurses and NYS Office of Mental Retardation and Developmental Disabilities (OMRDD) "medication certified personnel" may administer medication under the supervision of a NYS licensed physician, nurse practitioner, physician assistant or registered nurse. OMRDD medication certified personnel may only administer medications to children they are familiar with.)

Medication Supervision/Record Keeping -

- The camper must be reminded of the time to take the medication and be read/or read the name of the medication, dosage and other instructions for use, if self-administering the medication.
- At the time medication is self-administered or administered, staff must verify correct medication is taken by correct person and document administration by noting (in the medical log or recipient's medical record) the names of the recipient, medication, and witness (for self-administration) or administrator, and the date, time and dosage self-administered/administered.

Camp Trips - Medications required for trip participants and for "standing orders" are to be carried in the original container(s) by the trip leader or designee described in the written plan, and administered in accordance with the instructions on the medication. Use of medication(s) must be documented and reported to the health director when the group returns to camp.

Return/Destruction - Whenever practical, unused personnel medications should be returned to the camper's parents or guardian at the end of camp. If this is not possible, and when medications are outdated, they should be destroyed.

D. Universal Precautions

- Describe the "universal precautions" followed for blood and body fluid borne pathogens, including:
 - location and use of protective barriers, such as gloves and masks
 - cleaning and disinfection of contaminated surfaces
 - proper disposal of medical wastes, including needles and contaminated dressings and materials
- Identify the staff (by title) to receive "universal precautions" training.

E. Procedures for Health Care

- Describe who is responsible and the procedures for:
 - daily health surveillance of campers
 - sick call (times, location)
 - basic first aid and health care provisions
 - monitoring and caring for persons with existing medical conditions
 - handling medical emergencies, including foodborne and other outbreaks, communicable diseases and serious injuries and illnesses
 - response to an allegation of child abuse

Standing Orders

If your camp uses standing orders to provide preliminary patient care, they should be updated annually as part of your written plan. Standing orders are care instructions for common health complaints (i.e., headache, minor cut, etc.). They should be signed by a licensed physician, and tailored to the level of training/licensure of the camp's health director/staff. They must identify when professional medical advice or treatment is to be obtained, and require annual review and sign-off by a licensed physician.

- Identify provisions and phone numbers for, and provide written agreements with medical, nursing and emergency medical services.
- Describe medical procedures for out-of-camp trips, including administration of medications, and routine and emergency health care. (Don't forget to bring camper health histories and when provided, signed permission to obtain medical treatment on trips.)
- Who will oversee and what are the camp's risk reduction provisions for prevention of communicable diseases, outbreaks, overexposure to the elements (i.e., sun, cold, high temperatures, etc.) and other potential hazards, such as bites from deer ticks (Lyme disease) or bites or scratches from animals (rabies), etc. Describe staff training to recognize symptoms/indicators when assistance or action is necessary.
- Describe provisions for first aid kits and other medical supplies and equipment.
- Address maintaining the medical log and other medical records.

F. Camper Medical History and Screening

- Review of medical histories (include health history form used) prior to arrival at camp for:
 - record of immunization history
 - recent/current illness/injury/existing medical conditions
 - restrictions/limitations
 - special needs/diets
 - medications/treatments
 - allergies (i.e., medications, food, insect stings, etc.)
 - other concerns including bed wetting, sleep walking, etc.

Immunizations
<p>Per Section 7-2.8(c), an immunization record, including immunization dates against diphtheria, haemophilus influenza type b, hepatitis b, measles, mumps, poliomyelitis, rubella, tetanus and varicella is to be kept on file and updated annually for each camper. (Notation that immunizations are "up to date," or similar language is not acceptable!)</p> <p>No child should be prevented from attending camp because he/she is not immunized! If a child is not immunized because of religious beliefs, a written and signed statement from the parent or guardian, stating that the person objects to their child's immunization (due to their religious beliefs which prohibit the immunization of their child), must be included with the child's health history. Similarly, if the child is not immunized due to a medical exemption (i.e., severe immunosuppression, etc.) or because there is a documented history of the disease (measles, mumps, etc.) or serologic immunity (measles, rubella, hepatitis b), signed by a physician, this information must be included with the child's health history.</p> <p>If a case of an immunizable disease is identified, suitable precautions must be taken to isolate children who are not immunized and never had the disease in question.</p> <p>See Appendix D for the department's "Recommended Immunization Schedule," and for further information about immunizations, contact your Local Health Department or your regional New York State Department of Health Immunization Program.</p>

- Describe who will screen campers when they first enter camp, what they will be screened for and how findings will be addressed.

Health Screening

Performing a health assessment of camp participants (staff and campers) as soon upon initial arrival at camp as possible is an effective way:

- for participants to become familiar with health staff and discuss any health concerns they may not have shared in their health histories;
- for health staff to review, verify, and update as necessary, the individual's health needs/restrictions;
- for participant's medications and use instructions to be left with the health staff;
- for health staff to ask about the individual's potential exposure to communicable diseases in the two weeks prior to their arrival at camp;
- for health staff to assess the individual's present health status for signs of illness or other health problems; and
- to prevent the spread of communicable diseases and health ailments (respiratory, gastrointestinal, lice, etc.) to other camp participants by suitably isolating or restricting the suspect individual(s).

G Medical Log

- Any health related incidents involving campers and staff, including medical complaints and injuries, and camper allegations of child abuse must be logged and maintained at the health center. Include in the log, at minimum, the following information:
 - date and time of visit
 - name of patient
 - camper, staff (title) or other (indicate)
 - name of sleeping unit or group
 - nature of complaint
 - description of treatment and follow-up, if required
 - name of care giver

H Illness, Injury and Abuse Reporting

- Describe who is responsible and the procedure for reporting of illness and injuries (including allegations of child abuse) to the local health department. (See Section 7-2.8(d) of the State Sanitary Code for the list of reportable incidents. A poster providing this information is also available from your local health department.) Be sure to report all "reportable" incidents to your local health department within 24 hours.

Outbreaks

The rapid spread of gastrointestinal, respiratory and other ailments can quickly change a pleasant camp visit into a difficult experience for staff and campers. The following information is provided to help identify an illness outbreak and limit its impact.

- Check the medical log entries daily for common ailments and/or increased frequency of cases of illness with similar symptoms (i.e., headache, vomiting, diarrhea, fever, eye infection, sore throat, etc.); if noted, contact your local health department immediately (remember, reporting is required within 24 hours). Your children's camp may be experiencing a food, water or person-to-person transmitted outbreak. Early intervention may prevent additional cases of illness.
- Potential interventions:
 - Exclude ill persons from duties and/or activities until permission is granted to resume.
 - Physically separate ill from well; designate housing areas for large numbers of ill at overnight camps and send ill day-campers home.
 - Limit entry/exit from camp; postpone or restrict activities involving visitors, including other camps.
 - Handwashing (staff and campers) must occur frequently and not just during outbreaks! Wash hands after activities and always after using the bathroom and before eating. Staff should monitor campers' handwashing. Provide plenty of soap and disposable paper towels in handwash areas.
 - Housekeeping - "Sick" areas (bathrooms, sleeping areas, etc.) require increased housekeeping emphasis. Housekeeping staff should wear gloves and follow other precautions, as directed. Staff should practice thorough handwashing, and be encouraged to change to clean clothing prior to resuming other activities.
- Food Service:
 - always exclude ill food handlers from work (not just during outbreaks).
 - use gloves or utensils to handle prepared foods, including drink ice.
 - discontinue salad and sandwich bars, "family-style" service, buffets - use servers only.
 - don't allow use of common use or unclean eating utensils, drinking cups, etc..
 - require cleaning staff/dishwashers to observe sanitary precautions.
- Notify parents of the illness outbreaks.

Injury Control

Injuries are not “accidents”; they are predictable and preventable events that can be controlled when appropriate interventions occur. Establish an injury control program at your camp. Routinely review injuries noted in the medical log. Have injuries occurred at one activity, location or under the supervision of one counselor in particular or are there other common threads between injuries? If so monitor the event in question for obvious contributing factors. You may need to interview the victims/witnesses for more information about the injury event and pre-event also. Are there preventative measures that can be taken!

Example: Over a two week period, two 4 year old campers playing on the playground sustained cuts on their hands which required sutures. Your questions to the counselors and victims lead you to a swing, which at first glance, appears safe. You ask the victims to show you what they were doing, and learn both were sharing the swing with another camper. With two campers in the swing, you note the additional weight causes a sharp piece of wire to protrude below the seat!

Preventative Measures: Maintenance staff replaced the damaged swing seat and checked all the others for similar defects. Playground staff modified their written plan to include the routine inspection of the swing seats, and to allow only one camper per swing. The health director reviewed medical log entry requirements with her staff, and reminded them to provide details about how and where incidents occur.

Rabies Facts

Rabies is a deadly disease caused by a virus that attacks the central nervous system of mammals, including humans, pets, livestock and wildlife. Animals testing positive for rabies have been found throughout NYS. All animal bites and scratches, and any contact what-so-ever with bats or animals suspected of having rabies, must be reported to your permit-issuing official IMMEDIATELY to determine if testing of the animal, or human post exposure treatment is indicated. Request the booklets “Bat Rabies in NYS” and “Rabies in Wildlife” from your local health department for additional information on this subject. The following information should be addressed in your written plan, and as appropriate, included in staff and camper training.

Pre-camp

- Repair or modify camp buildings to keep bats and other animals out. Make sure that doors and windows are secure, and any small openings that might allow an animal entrance are sealed or screened, including chimneys, vents, etc.. Don't occupy buildings until they are animal proof, and free of unwanted animals. Provide animal proof garbage containers and arrange for routine refuse removal, cleanup and monitoring of these areas.
- If pets or domestic animals are allowed at your camp be certain these animals are immunized against rabies. Proof of current immunization should be maintained on file at the camp for the animals at camp.
- If confinement or capture of a suspect or attacking animal is necessary, who will be responsible for this task? (Address this before an incident occurs!) You may wish to seek the assistance of an animal control officer or nuisance wildlife agent.

Potential Exposure - If a bite, scratch or other contact with a suspect animal occurs:

- IMMEDIATELY wash the victim's wound(s) or exposed site thoroughly with soap and water. Seek medical assistance.
- If possible to do safely, try to confine or capture the suspect animal, or seek assistance as noted above.

- IMMEDIATELY notify your local health department (LHD) to report the incident and exposure details (circumstances leading to incident, who was involved or present, location, if the animal was captured, etc.) and to arrange for testing the suspect animal (if available).
- If the animal is found dead, dies or is killed, refrigerate the carcass with ice until testing is arranged.

Potential Exposure - BATS - If ANY exposure to a bat occurs, or if a bat is found in a room where someone was sleeping, or someone was present who could not communicate (i.e., infant, young child, person with sensory or mental impairment, etc.):

- Notify your LHD and describe the circumstances.
- Try to confine or capture the bat (without causing damage to the head) for testing.

Training - Information must be provided to staff and campers during training to prevent potential rabies exposure and, where possible, avoid the lengthy and costly rabies post exposure treatment:

- Never feed, rescue, handle or intentionally get close to any wild animals, including bats in caves and "abandoned wildlife."
- Don't touch and avoid injured, ill or stray animals.
- Don't touch and avoid pets and domestic animals you're not familiar with.
- Don't touch and avoid any animal that exhibits behavior that appears abnormal.
- Report to appropriate camp staff (i.e., camp director, health director, etc.) IMMEDIATELY:
 - the presence and location of any suspicious animal.
 - the presence of a bat in any sleeping area or in a building used for activities or assembly, or a dead or grounded bat, or a bat roosting within reach (indoors or outdoors) of campers or staff.
 - any injury caused by contact with an animal.

I. Camp Sanitation

- Describe the health director's plan for the camp's sanitation assessment, including living quarters, food service and refuse management.

V. ACTIVITY SAFETY AND SUPERVISION

Supervision of the campers is the single most important aspect of a well run children's camp. It is recommended staff always be assigned to supervise specific campers. Many camps "buddy" staff, so coverage is available in case of an emergency. The State Sanitary Code (SSC) requires that campers receive "adequate supervision," which is defined as:

- being protected from any unreasonable risk to their health and safety, including physical or sexual abuse; and
- visual or verbal communication capabilities existing between campers and their counselor during activities and a method of accounting for the campers whereabouts at all times.

A. General Supervision

Your supervision plan must describe how "adequate supervision" will be maintained during all aspects of your camp operation, from the time campers arrive until their departure.

The SSC specifies age and activity related counselor to camper supervision ratios; staff training and experience is also defined. Address the following items in your written plan as they relate to the general activities at your camp:

- Describe how campers who arrive early or leave late will be supervised.
- What ratio of counselors to campers will be maintained at the following times and places?
 - Between scheduled activity periods, describe the number, location, and duties of counselors in relation to campers (when the campers are traveling from one activity to the next). If counselors do not have visual or verbal communication capabilities with campers between activities, describe the method of accounting for the whereabouts of the campers at those times.
 - Going to or coming from the dining hall, infirmary, restrooms, showers, etc.
 - During cabin cleanup.
 - During transportation.
- Who is assigned the responsibility to cancel or curtail strenuous activities (on and off-site) due to weather conditions, e.g., high heat and/or humidity, elevated ozone levels, etc.? Describe how staff will be notified.
- Will you modify staff ratios during passive activities such as storytelling and watching movies? Indicate which activities and the supervision ratio for each.
- Do you propose to modify the required staff ratios during rest periods, or during the time between "lights out" and when all counselors must be in their assigned housing units? Describe when and how.
- What part, if any, will counselors in training (CITs) or junior counselors (as defined in your job descriptions) play in any of the above? Will CITs be counted in staff ratios? (See Section 7-2.5(k).)
- Describe what you expect counselors (with or without CITs) to do when supervising the campers in the above situations.
- Describe your discipline policy. What options will you allow counselors to use when dealing with unruly campers? What actions will be prohibited? At what point do you want counselors to seek the assistance of their supervisor when dealing with a disruptive camper?
- List the signs and symptoms of abuse your staff are trained to watch for, and describe how staff are trained to respond and who they are to report an allegation of or suspected physical or sexual abuse to.
- Describe what staff are to do if campers in their charge or other staff become ill or injured.

- You must have a lost camper plan to utilize when a camper is unaccounted for (lost). Describe the plan in terms of:
 - Assembly of camp population and verification of the identity of the missing camper(s).
 - Search procedures in camp and supervision of the assembled camp population.
 - When notification of your permit-issuing official, law enforcement agencies, and the parents/guardians of the missing camper(s) will be done.
- If not already described in the sections addressing evacuations, fire drills, electrical storms, etc., discuss the supervision plans for these events and other potential emergencies.

B. Activities - General

For each activity that your camp provides, from hiking to arts and crafts, address the following items:

- Supervision - how will the staff, counselors, and specialty activity staff (if any) coordinate the supervision of campers during the activity?
- What ratio of counselors to campers will be maintained?
- How, if at all, will CITs be integrated into this system?
- What safety equipment/techniques will be used? Describe the inspection/maintenance requirements.
- Include participant prerequisites, if any (i.e., training, skills, experience, age, etc.).
- What are the rules of the game or safety precautions to be taken during the activity?

There are some activities that, by their nature, are more hazardous or by code must meet specific requirements. Some activities that require special attention include the following:

C. Waterfront Activities

The waterfront, whether located "on-site" or at an "off-site" swimming pool or bathing beach used by the camp, is the most hazardous activity (location) in the camp environment. Regardless of where the aquatic activities occur, the children's camp remains responsible for meeting code requirements for camper protection. (When using off-site facilities, it is especially important to coordinate with the facility.) The safe and proper operation of the bathing facilities used by a camp depends upon a **well written and fully implemented** safety plan. Your plan must include a bather accountability (buddy) system. Failure to implement a complete buddy system has been a significant contributing factor in every camper drowning since 1986.

Whether your swimming program is conducted on-site or at an off-site facility, a complete plan for swimming must be submitted covering all of the following components:

- Assessment of camper swimming ability.
 - How, when and by whom will the swimming ability of campers be assessed? (See Section 7-2.5 for requirements for a progressive swimming instructor.)

- Campers segregated/identified according to their swimming ability.
 - How are areas for swimmers divided from those for non-swimmers? (Describe your waterfront or the off-site swimming facility swim areas including position of float lines, water depths, currents, docks, rafts, diving boards, etc..)
 - If you do not have a physical barrier such as a dock or separate pool to physically separate non-swimmers from swimmers (float lines are not sufficient), how will you identify non-swimmers while in the water? (The SSC requires that they be visually identified.) The maximum water depth considered acceptable for non-swimmers is less than chest deep. Who will be responsible for insuring that non-swimmers remain at this depth or less? (See SSC Section 7-2.11 for exceptions.)
- Supervision Ratios
 - How many lifeguards and how many additional counselors will you have on duty during swimming or instructional swim periods (can be expressed as a ratio - reference Sections 7-2.11(a) and 7-2.25(e)(2))?
 - Where will the lifeguards/counselors be stationed? What equipment will lifeguards have (whistles, poles, rescue tubes, etc.)? Describe the responsibilities of the on-duty counselors during aquatic activities.
 - If campers with developmental disabilities attend your camp, how will these individuals be supervised (see Section 7-2.25 for special requirements, ratios, etc.)?

Seizure Disorders, Aquatic Activities and Supervision
--

An individual who has a seizure in the water:

- is likely to submerge quickly and silently, without portraying the distinctive drowning signs, or calling for help, although convulsive movements may be exhibited;
- is susceptible to aspirate/ingest water due to an open/passive airway; and
- won't be able to react or assist in a rescue attempt.

If the bather survives, a medical check-up is essential (even if the rescued/resuscitated victim appears to be recovered), as life-threatening complications may result.

A person who experiences a seizure in/out of the water should not return to/participate in aquatic activities that day, even if he/she appears recovered, as the likelihood of experiencing another seizure is increased.

Contributing factors to drownings of persons with known seizure disorders identified in NYS investigations include:

- an uncontrolled or poorly controlled seizure disorder, and
- missed seizure medication.

Other potential factors that may trigger a seizure include fatigue, stress, use of non-compatible medications, illness/injury, etc..

Persons with seizure disorders should never swim alone. This is especially important if they exhibit any of the above contributing factors. Ideally, they should be accompanied in the water by someone familiar with their condition who is trained and able to aid them, should a seizure occur. Training should include the need to:

- recognize the bather is in distress;
- support the victim's head and face out of the water to minimize ingestion of water;
- tilt their head back to keep their airway open;
- keep the victim away from pool sides or docks in the water to avoid injury if uncontrolled body movements occur;
- remove the victim from the water as soon as possible, to further respond to the person's needs and
- seek medical assistance.

One-to-one in the water supervision of persons with known seizure disorders is *strongly recommended* at children's camps. (One-to-one supervision is required for these individuals if they attend a camp with an enrollment of 20% or more campers with developmental disabilities per Section 7-2.25(e)(2).) The identity of seizure prone bathers should be made known to assigned aquatic staff, who should also be trained how to recognize and respond to a victim experiencing a seizure in the aquatic area.

For additional information on this subject, contact the Epilepsy Foundation of America or your local epilepsy association.

- Buddy system/board system - With the exception of certain types of off-site aquatic activities at aquatic theme parks (request "Fact Sheets" referenced above), a buddy system must be in use to supervise and account for bathers at all times. Your buddy system/board system must include the way you will implement the following:
 - Pairing each camper with a "buddy" of similar swimming ability to provide each camper a "personal protector."
 - Accounting for each bather by name, swimming ability, location on/in the waterfront, and the name, etc., of their assigned buddy.
 - The need to record the entry and exit of each buddy pair/bather to the various sections of the waterfront.
 - By whom and how will the "buddy check" be performed to account for the bathers and how often will they be held (the maximum interval by the code is 15 minutes)?
 - What device ("board") will be used to record and maintain the above information during instructional and free swim periods.
 - The signal(s) to be used to call a buddy check. At off-site facilities, be certain your "signal" will not interfere with the facility's "signals."

- Lost Swimmer Plan - Whenever a "buddy check" fails to account for the whereabouts of a bather, the lost swimmer plan must be implemented. This plan must include provisions for:
 - Signals to be used for implementation.
 - Procedures for land and water searches.
 - Supervision of campers.
 - Notification of camp director, and if needed, the parents, local law enforcement and local health department.

- Boating
 - Describe your boating rules, and any prerequisites for participants.
 - What type of life jacket (personal flotation device) or vest will be used and who will be required to wear them?
 - Is other safety equipment required, such as helmets?
 - How will boaters be integrated into the supervision and buddy systems?

Life Jackets. They Float. You Don't!

Wearing your life jacket (life vest or personal flotation device - PFD) can save your life! When boating, occupants seldom expect to find themselves in the water; but if they do, and are not wearing a life jacket, they increase their chance of becoming a boating statistic. Approximately 80 percent of the people who died in boating accidents in the United States in 1994 were not wearing life jackets. Since 1985, *New York State has required all boat occupants at children's camps to WEAR United States Coast Guard-approved life jackets.* No camper boating deaths have occurred since 1980 in New York State.

What Type is Right?

The following types are all accepted as meeting the life jacket requirements for New York States children's camps. Look for the United States Coast Guard approval and type on the label.

Type I - Offshore Life Jacket: Designed for large, rough waters where rescue may not be prompt and to turn most unconscious wearers face up. These PFDs are most often found on commercial crafts. They tend to be bulky.

Type II - Near Shore Buoyant Vest: Less bulky and providing less floatation than Type I, these vests are for use in calm inland waters where there is a chance of fast rescue; vest will turn some wearers face up.

Type III - Flotation Aids: Generally the most comfortable type of life jacket. This type includes many activity specific designs (i.e. water skiing, fishing, sailing, etc.), so be sure to check the label. They are not designed to turn the unconscious wearer face up, but will keep the wearer upright in the water.

The Fit is It!

When you select life jackets for your children's camp and to fit individuals, keep in mind they must be sized appropriately. Read the label to determine the size and weight restrictions. Life jackets should be adjusted to fit snugly. To determine this, lift the shoulders of the life jacket; it's too big if there is more than three inches between the shoulders of the wearer and the device, or if the device slips over the chin or ears. The use of straps between the legs is an important feature on life jackets for small children.

Check Life Jackets

Check flotation characteristics at the beginning of each season. Depending on materials, care and use, there is a potential for buoyancy loss. Test: fit the jacket to the wearer and have them walk gradually into the water until it completely supports the wearer. If the PFD floats the person out of the water and feels comfortable, the device is still usable.

Check the materials for wear and tear, pulling seams, straps and buckles for strength. Kapok filled jackets should be checked for air leaks/moisture, which causes the Kapok to deteriorate and lose buoyancy. Discard when in doubt.

Dry life jackets and store out of the sun, away from chemicals such as gasoline or oil.

Information provided by the U.S. Coast Guard and the National Safe Boating Council.

D. Horseback Riding

Equestrian Activities

Riding a horse involves teamwork and, when necessary, requires the rider to exert control and influence over a powerful and potentially unpredictable animal; maturity, experience, coordination, timing and physical ability are all components required to achieve safe riding skills.

Few injuries are reported for equestrian activities, however, when injuries do occur, they are frequently serious (concussions and fractures represent most injuries, and injuries to the head and neck are the most serious). Falls, collisions, being dragged with a foot caught in a stirrup, being crushed between the horse and the ground, and being trampled, kicked or bitten account for most injuries. Equipment problems are also associated with injuries and include improper boot-stirrup or helmet fit; broken reins, bridles or stirrup straps; and malfunctions of the stirrup-release mechanism.

Based on this information, it is recommended you carefully select experienced and trained/certified staff for this activity. First aid and cardiopulmonary resuscitation certifications are strongly recommended. Affiliation with a horsemanship organization may aid you in developing a safe equestrian program for your camp.

Include the following in the plan component:

- What type of helmets will be used? Who will determine if helmets are fitted correctly and securely? (See the sidebar at the end of this section.)

Equestrian Helmets

Helmet use has reduced the number and seriousness of head injuries sustained in horse rider falls. Helmets lessen the risk of serious head injury by redistributing and reducing the potentially harmful forces caused at impact. Helmets must fit snugly (staying in place when the chin strap is unfastened) must be secured snugly with the chin strap, and must not obscure the wearer's vision.

The SSC requires horseback riders at children's camps to wear protective headgear. When you purchase or select helmets, look for EQUESTRIAN helmets meeting the American Society for Testing and Materials (ASTM) standard, F1163. "SEI" (Safety Equipment Institute) and "ASTM F1163" will be printed on the label found inside helmets meeting this standard. The United States Pony Clubs, Inc., no longer has a helmet standard and requires use of helmets meeting "ASTM F1163" for their events.

What types of helmets are acceptable?

Do not substitute bicycle or other types of helmets for equestrian helmets; protection may not be adequate. Helmet design standards are developed to protect the wearer from the types of injuries to the head/neck sustained in the specific activity; the amount of coverage the helmet provides to the head/neck, the protective shell and padding, and the retention system are designed for the activity.

How often should helmets be replaced?

Manufacturers recommended that helmets over five years old, helmets which show signs of wear of their components (i.e., liner/padding, shell, securing strap, etc.) or damaged helmets need replacement. Labels found inside helmets meeting the "ASTM F1163" standard suggest replacement after impact severe enough to cause visible damage to the outer shell and/or causing a significant amount of compression to the liner/padding.

- What type of footwear and stirrups will be used? Heeled footwear is required for "open" stirrups (breakaway open stirrups may be used); non-heeled footwear may be used only with "closed" stirrups. Sneakers are not heeled footwear!
- How will horses be evaluated for temperament and rider skill level? How will the rider's ability and comfort level with horses be assessed, and riders matched to horses?
- What instruction or training (content and amount of time devoted) will be provided to all participants, including staff?
- What basic instructions are provided for:
 - Behavior around horses?
 - Control of the horse (i.e., appropriate techniques to stop, turn the horse, and perform an emergency or rapid dismount)?
 - What to do if the horse becomes frightened or misbehaves?
- At what point in training will beginners be allowed to participate in trail rides?
- What supervision ratio will be used during training? Trail rides? Where are staff positioned during trail rides? How much distance is maintained between horses?
- What training is provided to staff and campers for emergencies, such as a runaway horse?

- Are trails marked for ability? When uncorrected, are trail hazards (i.e., narrow trail, steep hill, etc.) posted and discussed in advance?
- Who will inspect and maintain equipment, trails and care for the horses?
- What provisions will be made for emergency communications and response for a rider injured on a trail ride?
- If an off-site riding academy is used, how will the items above including supervision, safety equipment, training, assessment of ability, etc. be covered? Which items will be the responsibility of the academy and which will be retained by the camp?

E. Rope or Challenge Courses

- Provide a plan of the course layout and note the location on the camp map.
- Who will inspect the course and all ropes, harnesses, etc. prior to and during the season?
- What records do you keep of the amount of service various elements have seen (i.e. how long has a rope been in use and how many falls has it "caught")? At what point will equipment be discarded and replaced?
- Who will train your staff in the skills (spotting, belaying, rescue, emergency procedures, etc.) needed to operate the course? Include training curriculum.
- What training is given to campers prior to their participation?
- List the safety equipment, rules and procedures for each "element" of the course separately.
- What criteria (age, height, training, physical ability, etc.) must prospective participants satisfy to be allowed on the course?
- How will course components be supervised? How will campers waiting to participate be supervised?

F. Archery

- Describe the following characteristics of your archery range:
 - Location (identify on camp map). Where are warning signs, etc. needed to keep the "down range" and "behind target area" clear of hikers?
 - Distance from target to firing line and ready line.
 - Type of back stop.
- What training is provided to archery staff?
- What training is given campers prior to their using the range?
- What safety equipment is used by participants?

- What are your rules for range discipline concerning:
 - How many on the firing line at one time?
 - Who is responsible for supervision of campers on the ready line?
 - When and by whom are the arrows retrieved?
- How often does the archery counselor inspect the equipment for damage (arrow, bows, etc.)? Where is equipment stored?

G. Riflery

- Identify on your camp map where the range is located, and warning signs are placed when the range is in use.
- Where are the guns and ammunition stored? Is the storage area locked and who has a key to it?
- What type of backdrop/containment system is used to prevent bullets from leaving the range?
- What are the range discipline rules for those on the firing line and ready line? Describe supervision.
- How are targets retrieved?
- What safety equipment is used?
- What training is provided for staff assisting the riflery instructor?
- What training is given to campers prior to firing the weapons?

H. Out of Camp Trips

- Provide an itinerary for each out-of-camp trip. (For trips dependent on weather conditions, list alternate sites/plans for cancellations.) If there is a written agreement for use of the trip site, include it.
- How are trip leaders chosen/prepared to lead trips?
- What are the plans for supervision and accounting for camper and staff whereabouts when out of camp?
- What provisions will be made for routine medical care during the trip? For emergencies?
- If the trips are into wilderness or off road areas, what provisions are made for communication with the camp? If the trip intermingles the group(s) with the public, how will communications be maintained?
- If meals will be carried or prepared "on the trail," how will food be transported, stored, refrigerated, cooked, prepared, etc.? What types of foods? Is drinking water provided? Where is it obtained from?

VI. ORIENTATION AND TRAINING OF CAMPERS AND STAFF

A. Staff Training

Staff training and orientation is as important as the selection of good staff. Training programs should occur prior to the arrival of the first campers. Your plan should describe training procedures, referring where applicable to your written plan material, including, at a minimum, the following items:

- An outline of the training curriculum.
- A tour of the camp property.
- A description of the camp's hazardous areas and potential hazards.
- The chain of command in the camp.
- Supervision of campers (ratios, effective methods, responsibilities, etc.). Appropriate conduct for staff with campers, and staff with staff. Procedures for dealing with intruders. Acceptable and unacceptable methods for disciplining campers.
- Recognition and reporting of child abuse allegations.
- Camp medical plan including provisions for first aid and emergency medical care; sick call.
- Recognizing, reporting, and reacting to injuries and illness.
- Waterfront supervision, lost swimmer plan.
- Buddy system.
- Lost camper plan.
- Out of camp trip procedures and responsibilities.
- Lightning safety.
- Fire safety/drills.
- Camp evacuation procedures.
- Training in assigned activity duties and safety procedures.
- How attendance at, and content of, staff training will be documented for each staff member.

B. Camper Orientation/Training

One of the first things every camper should receive on arrival at your camp is an orientation to the camp and the relevant parts of your safety plan. Your written plan should discuss, at a minimum, the following points:

- An outline of the orientation curriculum.
- A tour of the camp property.
- A description of the camp's hazardous areas and potential hazards.
- How and to whom to report injuries or illness, and sick call procedures.
- To whom other types of incidents should be reported.
- The buddy system.
- Lost camper plans.
- Fire drill signals and procedures.
- Evacuation procedures.
- Out of camp trips.
- Lightning safety plan.
- General camp rules (e.g., running, horseplay, etc.).
- How the camper orientation process will be documented.

While the two processes (staff training and camper orientation) are similar, they will differ considerably in the depth to which various topics are covered, as can be seen from the examples below.

Topic	Staff Training	Camper Orientation
Child Abuse	<ul style="list-style-type: none"> ➤ need to be trained to know, understand and recognize what abuse is. ➤ must know when and to whom, to report all allegations/observations regardless of the source. 	<ul style="list-style-type: none"> ➤ only need to know that if they are uncomfortable about anything at camp, to whom they should go to discuss it. There should always be one route through their counselor/unit leader and another independent route, such as through the health director.
Buddy System/Waterfront Supervision	<ul style="list-style-type: none"> ➤ need to know how to scan water and their supervision responsibilities at the waterfront. ➤ need to know how to help run a buddy check. ➤ need to know their role in lost swimmer plan. ➤ need to know and enforce rules, re: diving, running, etc.. 	<ul style="list-style-type: none"> ➤ need to know to stay with their buddy and how to answer a buddy check. ➤ need to know what to do if their buddy leaves the water or disappears.

APPENDIX "A"

NEW YORK STATE DEPARTMENT OF HEALTH
 Bureau of Community Environmental Health and Food Protection

Children's Camp Written Plan Checklist

Dear Camp Operator:
 Use the following checklist to determine if your written plan addresses the requirements of Subpart 7-2 of the New York State Sanitary Code (7-2.4(c)(1), 7-2.5(n), 7-2.25). Activities not provided by your camp should be checked "N/A" for "Not Applicable." All other items listed, including those already shaded in the "N/A" column, must be addressed in your plan. Please submit the completed checklist with your written plan or plan revision.

Camp Name:	Date: / /
-------------------	-------------------------

County:	Address:
----------------	-----------------

Required Plan Components	Camp Operator Completes			Local Health Department Remarks	Plan Segment Acceptable	
	Page	Yes	N/A		Yes	No
I. TABLE OF CONTENTS						

PERSONNEL:

Chain of Command						
Job Description						
Qualification/Reference Verification						

FACILITY OPERATION:

Water Supply						
On-Site Sewage Treatment System(s)						
Lightning Risk Assessment						
Transportation						
Housing						
Food Protection						
General Operation/Maintenance						
Waterfront Facility Maintenance						

FIRE SAFETY:

Evacuation Plans; Assembly Area						
Fire Prevention						
Electrical Safety						
Alarm System & Smoke Detectors						
Fire Extinguishers						
Exits & Exit Signs						
Fire Drills and Log						
Submitted To Local Fire Department						

MEDICAL PLAN:

Duties of Health Director/Personnel						
Camp Infirmary Description						
Medication Storage/Administration						
Universal Precautions						
Routine Health Care/Surveillance						
Emergency/Outbreak Procedures						
Camper Medical History/Screening						
Existing Health Conditions/Restrictions						
Medical Log						
Illness, Injury & Abuse Reporting						
Camp Sanitation						

Required Plan Components	Camp Operator Completes			Local Health Department Remarks	Plan Segment Acceptable	
	Page	Yes	N/A		Yes	No
ACTIVITIES/SUPERVISION:						
General Supervision; Discipline						
Passive Activity Supervision						
Supervision During Rest/Sleep Time						
Between Activity Supervision						
Supervision During Transportation						
Supervision In Emergencies						
Swimming						
Buddy System						
Off-Site & Wilderness Swimming						
Stream Crossing/Incidental Immersion						
Boating						
Horseback Riding						
Rope/Challenge Course						
Archery						
Riflery						
Out-of-Camp Trips						
Other Activity Plans						
STAFF TRAINING:						
Outline of Curriculum						
Tour of Camp						
Description of Camp Hazards						
Chain of Command						
Supervision and Discipline						
Child Abuse Recognition & Reporting						
First Aid/Emergency Medical Response						
Injury and Illness Reporting						
Buddy System						
Lost Swimmer Plan						
Lost Camper Plan						
Out-of-Camp Trips						
Lightning Plan						
Fire Safety/Fire Drill Procedures						
Camp Evacuation Procedures						
Activity Specific Training						
Training Attendance Documentation						
CAMPER ORIENTATION:						
Outline of Curriculum						
Tour of Camp						
Description of Camp Hazards						
Reporting of Illness & Injury Incidents						
Buddy System						
Lost Camper Plan						
Fire Drills & Evacuation						
Out-of-Camp Trips						
Lightning Plan						
Orientation Attendance Documentation						

Completed by: Camp Operator _____ Date _____	Revisions Added by: Camp Operator _____ Date _____
Local Health Department Reviewed by: _____ Date _____ Approved: Yes No (circle one)	Local Health Department Reviewed by: _____ Date _____ Approved: Yes No (circle one)

APPENDIX "B"

Camp Job Description Example

Title:

Creative Arts Program Director

Minimum Qualifications:

- Training and experience in creative arts (documented).
- Ability to teach creative skills in at least one of the arts areas.
- Ability to set up demonstration area and program, and to teach skills to staff and campers of all ages.
- Ability to supervise staff, make scheduling assignments, and order supplies and equipment.
- Desire and ability to work with children outdoors.
- Ability to relate to one's peer group.
- Ability to accept guidance and supervision.
- Good character, integrity, and ability to adapt to camp setting.
- Enthusiasm, sense of humor, patience, and self-control.
- College student or at least 19 years-of-age.

Responsible To:

Camp director

General Responsibility:

To plan, direct, and supervise camp's creative arts program including drama, crafts, arts, jewelry, and ceramics.

Specific Responsibilities:

- Set up creative arts area during staff training.
- Teach staff their responsibilities in activities during staff training.
- Teach and monitor proper use of equipment.
- Conduct initial and end-of-season inventory, and store equipment for safety.
- Create check-out and return system for craft supplies.
- Check equipment and make (or file for) repairs.
- Conduct daily check of program area and equipment for safety, cleanliness, and good repair.
- Write (with help of activity assistants) and check all lesson plans for creative arts programming.
- Keep records on all participants; help them progress from beginner to advanced levels.
- Plan and direct camp-wide drama programs including plays, puppet shows, talent shows, welcome skits, skit nights, etc..
- Assist with overall camp activities regarding creative arts.
- Submit orders for equipment and supplies when needed, ensuring timely arrival of materials.
- Assist in packing all materials and supplies at end of season.
- Evaluate current season and make recommendations for equipment, supplies, and program for following season. Update written plan for activities as needed.
- These are not the only duties to be performed. Some duties may be reassigned and other duties may be assigned as required.

APPENDIX "C"

Lightning Safety Basics

Vincent P. Idone, Ph.D.
Department of Earth and Atmospheric Sciences
University at Albany, SUNY

Lightning is a natural phenomenon that is undeniably dangerous and potentially life threatening. In New York State, the average absolute amount of lightning activity is considered "light to moderate" compared with states such as Colorado or Florida, and this activity is primarily limited to the summer season. Of course, it is the summer season when almost all camp activities are underway. Also, the local and immediate threat of lightning during a particular thunderstorm can be high, depending on the intensity of the storm and the frequency of lightning strikes to ground. Hence, the threat of lightning must be recognized and responded to. The purpose of this appendix is to provide a basic set of qualitative principles that can be applied in a sensible manner, thereby allowing camp personnel to deal with this threat in a balanced and appropriate way.

The perspective of many individuals with respect to lightning is extreme: some are utterly terrified of lightning while others almost completely ignore the threat, confident that the "odds" of lightning striking any particular location are quite low. In attempting to deal rationally with this threat, you should first realize that it is impossible to *always* be *completely safe* from lightning; about the only way you could achieve such a secure state would be to live inside a completely enclosed metal structure - not a very practical option! On the other hand, you can do many things to *reduce* and *minimize* the threat from lightning. First and foremost, you should realize that because of the much improved forecasting and tracking of storms with present-day capabilities, it is much easier now to avoid many situations of increased risk. It should be a very rare day indeed that any camp is *completely surprised* by thunderstorm and lightning activity in the area. With the present deployment of sensing technology that includes real-time data from advanced Doppler radar, satellite imagery, and the direct detection of individual lightning strikes via the National Lightning Detection Network (NLDN), there is a substantially increased amount of useful and detailed information available on local thunderstorm/lightning activity. This information is readily disseminated via NOAA Weather Radio, local TV/radio reports, and the Weather Channel. Hence, there is no reason why any camp should not be adequately informed of the likelihood of storms developing or the present specific location and movement of existing thunderstorms relative to the camp grounds.

With good prediction and tracking of storms, it is possible to anticipate dangerous situations and take simple precautionary measures to minimize the risk from lightning and other thunderstorm related dangers: strong winds, large hail, and flash floods.

Given that storms are predicted for a given day, it is suggested that the following modifications to daily activities be considered:

- 1) Eliminate or minimize activities that put campers beyond a fifteen minute return time to the primary camp shelter.
- 2) Dedicate one or more individuals to closely monitor weather reports and warnings. Someone ought to watch the sky for signs of storm development (i.e., rapidly darkening cloud bases or nearby, rapidly growing cumulus towers evidencing the so-called "cauliflower look"), watch for visual identification of lightning channels, and listen for thunder. If any of these conditions occur, rapid notification and movement of the campers to the primary shelter should ensue.

- 3) Any campers who do undertake distant activities despite a forecast of thunderstorms, should be in communication with the camp monitor via cell phone or portable radio so that they can receive advanced warning of approaching dangerous weather and can attempt to take whatever limited precautions they can. They should at least take a portable AM/FM radio or NOAA weather radio as well as a map that will allow determination of their location relative to that of existing storms.

When a thunderstorm is bearing down upon a camp, the following actions should be taken:

- 1) Campers should be moved to the primary shelter (what constitutes a primary shelter is described below) with sufficient prior warning to avoid any exposure to local lightning activity during the period of movement to the shelter.
- 2) If there is inadequate primary shelter available for the number of campers present, cars and buses can be used, as they offer good protection from lightning, provided the vehicle has a metal roof (do not use convertibles) and the occupants keep the windows closed and do not touch the metal exterior of the vehicle. (It is probably wise *not* to run the engine for the use of air conditioning, for example, as the danger from carbon monoxide poisoning may be greater than that due to lightning.)
- 3) The use of lean-tos and other partial shelters such as picnic stands, sheds or similar structures should be avoided. Absolutely never take shelter under a tree, particularly an isolated tree in an open area. If there is no recourse but to use a lean-to or other similar type shelter, at least try to position yourself in the middle, as far as possible from the walls. However, it must be understood that this type of structure offers essentially no protective advantage.
- 4) Any boating activities should be suspended and the participants should quickly return to shore to seek appropriate shelter.
- 5) Inside the primary shelter facility, individuals should stay away from the immediate proximity (i.e., allow at least a few feet of clearance) of open windows, plumbing facilities, and electrical service panels or conduit. A lightning strike to the building could involve current flow through these systems, which could then "jump" to an individual; this is more likely to occur the closer someone is to a current carrying object. For this same reason, occupants also should avoid the use of conventional land-line phones during a storm. Cell phones and remote phones are perfectly safe to use as they are not connected to the electrical wiring of the structure.
- 6) Personnel should remain in their shelters until no thunder has been heard for a full thirty minutes; if you can hear thunder, you are within range of a potential strike. Do not try to use any particular range established by the "flash-bang" technique as safe. For example, determining that the lightning is more than two or three miles away provides a false sense of security, as the distance from one strike to the next can be more than several miles.

If you are caught away from any primary shelter facilities, apply the following measures:

- 1) Seek out a low spot away (as much as reasonably possible) from trees, metal fences or any other tall or horizontally lengthy conducting objects.
- 2) If you are well within a forested area, try to locate yourself within the general proximity of the *shorter* trees, while still maintaining as much distance as possible between you and all nearby trunks. Absolutely do not shelter against or very close to any particular tree trunk.

- 3) Assume a *protective crouch*, with your legs bent at the knees and your feet closely together; keep your hands on your knees and lower your head toward your knees. *Do not lie down* as you want to minimize your *height* and your *contact area* with the ground. You may want to hold your hands over your ears to guard against auditory damage should there be a very close strike.
- 4) If large hail occurs, try to cover yourself with something that is non-conducting (such as a backpack or sleeping bag) and attempt to remain in the protective crouch. However, be alert also to the possibility of a flash flood, in which case you might have to move to higher ground quickly.
- 5) If a group of individuals needs to shelter as described above, it would be best if they attempt to spread out to the degree possible (maintaining voice contact), as a strike to a tightly huddled group might involve everyone, leaving no one available to provide immediate medical assistance.
- 6) Maintain the crouch position until the storm has passed. Given that this position may be difficult to maintain continuously for the full period necessary, you might rest for a few minutes by sitting on the ground with your feet tucked as close to you as possible, returning to the crouch as soon as you are able. If strikes are occurring frequently and very close (as evident by not just loud booming thunder, but initial crackling and popping sounds), try to maintain the crouch position despite any muscle cramps. It could make the difference in your survival.

If someone is struck, what should you do? You should get **immediate emergency medical assistance**. Be aware that *an individual struck by lightning often appears to be dead*, as they have no pulse or respiration. However, usually the victim can be revived with CPR, so this must be administered as soon as possible. Note that there is absolutely no electrical danger to anyone helping a lightning strike victim; *there is no residual charge or voltage carried by the victim*. Note that mechanical injuries (broken bones, torn muscles) and burns are also possible, so that caution should be exercised in handling or moving a victim. Finally, it is sometimes the case that a lightning strike involves multiple individuals. In such cases, those attempting to give immediate assistance to the victims might be confronted with one or more individuals who are conscious and pleading for assistance while other victims appear dead. In this type of situation, if assistance is limited, the unconscious individuals should be treated *first*, as they are likely to be in acute cardiac or respiratory arrest. The conscious victims (with the rare exception of apparent and severe grievous injury), should be treated as soon as possible after attempts to revive the others have been completed or failed.

*What constitutes a **primary shelter**?* A primary shelter is any substantial building that has *plumbing or electrical service*, is *completely enclosed* and has *sufficient volume* to shelter a good number of individuals. By the nature of such construction, this type of building has some inherent lightning protection; if struck, there is a good chance the lightning currents will follow the existing low resistance paths to ground. (Again, use of such a building provides a relative protection benefit, not a guarantee of protection.) It is recommended that each camp have such a building and, if possible, the building be equipped with an additional formal lightning protection system. Any building with a metal roof ought at least to have the roof well grounded. Buildings located on the top of a hill or adjacent to a tall tree or stand of trees have an enhanced chance of being struck. Thus, a lightning protection system for such buildings should be considered, particularly if an adjacent tree is taller than the building and the horizontal separation of the tree from the structure is less than the height of the tree. Such systems, though never perfect, can provide a much reduced chance of damage or injury and need not be very complex or expensive, especially for smaller structures. Though caution is definitely advised in selecting a lightning protection installer, there are reputable firms that will provide advice and installation options consistent with the particular needs of any particular structure. Often, qualified electricians also can offer useful advice and carry out basic protection installations. (Specifics on the installation of lightning protection systems can be found in NFPA 780, available from the National Fire Protection Association as well as an older but excellent reference work, *Lightning Protection*, by R. H. Golde.)

It should be emphasized at this point that once a lightning protection system is installed, it must not be neglected. It needs to be maintained to guard against breaks in continuity or corrosion that would severely compromise its effectiveness. A compromised system can actually be more dangerous than no system at all!

In conclusion, there are many simple measures that can be taken to *minimize* the danger from lightning during summer camp activities. I have emphasized here the *anticipation* and *avoidance* of dangerous situations, as I believe this is the most effective overall approach. This may occasionally produce "unhappy campers" who object to having activities cancelled, postponed or delayed. However, I believe it is best to err on the side of caution given the potential dire circumstances possible from lightning. Fortunately, for better than 80% of the time, these concerns will probably not need to be addressed. Hence, I believe that the precautions advocated here represent a balanced and reasonable approach to lightning safety for NYS campsites.

December 1998

APPENDIX "D"

Recommended Immunization Schedule

		Birth	2 months	4 months	6 months	12-15 months	4-6 years	11-12 years
Polio	OPV		√	√	√		√	
Diphtheria Tetanus Pertussis (whooping cough)	DTP**		√	√	√	DTaP may be used √	DTaP may be used √	Td every 10 years √
Haemophilus Influenza (Type b)	Hib**		√	√	√	√		√*
Hepatitis B	Hep B	√	√		6 - 18 Months √			√*
Measles Mumps Rubella	MMR					√	√	
Varicella Zoster Virus Vaccine (Chicken Pox)	VZV					12 -18 Months √+		

√*

Hepatitis B vaccine (3 doses at appropriate intervals) and MMR dose 2 is recommended for adolescents who have not previously been immunized.

**

DTP/Hib is also available as a combined vaccine.

√+

Children who have not been vaccinated previously and who lack a reliable history of chicken pox should be vaccinated by 13 years-of-age.



State of New York
George E. Pataki, Governor
Department of Health
Antonia C. Novello, M.D., M.P.H., Dr.P.H., Commissioner